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Proceedings of the Annual Meeting of the Graduate Nurses' Association of Ontario, Held in the Residence of the Sick Children's Hospital, on Tuesday, May 24th, 1910.

At two o'clock p.m. the chair was taken by the President, Mrs. Currie, and after the meeting had been opened by prayer the President read the Annual Address.

THE PRESIDENT'S ANNUAL ADDRESS.

Our association has met together again and I am very pleased to see such a large representation from among our nurses. As our afternoon session is well occupied already, I shall not detain you by a lengthy address. The year has been an extremely uneventful one, and I regret that through illness my position as President has been so inadequately filled. The Executive have, nevertheless, been untiring in their efforts to advance the interests of the society, but have been somewhat hampered by so frequently having no quorum.

There are two or three thoughts I would like to place before you and on which I invite discussion later. They are these: How many of you as graduate nurses have found on taking up private nursing that you have received sufficient instruction on nursing in a private family? Is there, in your opinion, sufficient time given to such instruction, or is the tendency toward the higher education of the nurse a deteriorating factor against her ability to care for, not only the patient in a private home, but the articles in use in the home and general home furnishings. After all, is it not here where a nurse's work centres, and is her real object in life being neglected in the grasping for knowledge properly belonging to the medical man? A man's home is his castle. Why negligently, carelessly, thoughtlessly or ignorantly destroy? Where does the fault lie? With the Superintendent who fails to educate the nurse on these lines, or with the nurse who fails to realize what her calling demands?

Ladies, do you realize fully the great calling of your profession, your privileges and your gifts? You cannot until through illness you know the true value of a silent footstep, a quiet voice and, above all, a gentle touch. Ladies, the one who possesses gentle, loving hands to care for and heal the sick, need crave no greater gift. She who enters the profession for money only, and regards it only as a means of livelihood, and considers largely only the longest time off duty and shortest time on duty and the largest fee obtainable, is a menace to the profession.

What is our Registry doing for our nurses? We all understand that any position worth filling is usually a difficult one to hold, and no doubt the Registrar has her difficulties, and nurses should be considerate, ladylike and helpful.

There is another side to this. Is the Registry not for the assistance of the nurse, the aid of the profession, and the benefit of the public? At the time of our Registry's origin the situation was an extremely difficult one, but through Miss Barwick's careful organizing a Registry was evolved that bid fair to overcome all difficulties. As one who from its origin approved of and assisted in the forming of the Registry, I regret to say that personally, as one of the public in extreme need, and applying to the Registry for assistance, my experience has been very unsatisfactory.

Another question is this: Do you think there are too many societies to which you belong, or have been asked to join? If so, what could be the solution of this difficulty? Are we not all working for the same great object? Then why should we not form one good, large, strong society? Does not the graduate nurse eventually become the Superintendent of a training school or Superintendent of a hospital? Why, then, should we have three societies

where one might be? A most interesting meeting of the Canadian Hospital Association was lately held in Montreal, and every graduate nurse might have profited by attending that meeting. In unity there is strength and conservation of energy. Since listening to the excellent papers read at Miss Brent's meeting yesterday, the wish that all graduate nurses might hear them was still more firmly fixed in my mind. Are the objections to such a union unsurmountable?

E. McL. CURRIE.

The Secretary, Miss Stewart, presented her report.

SECRETARY'S REPORT.

We meet to-day under the shadow of an Empire's grief, and feel it but fitting that we as nurses should add our tribute of sorrowing affection to the memory of our late beloved King, wisest of rulers and kindliest of men, who so recently has laid down the sceptre at the call which no one, be he King or subject, may disregard. Last year our Canadian Sisterhood was most especially honoured by the King in being permitted to lay a wreath on the tomb of our late Sovereign, Queen Victoria, an honour not soon to be forgotten, and deeply appreciated by nurses in Canada.

As an association, too, we have been visited by the Grim Reaper, having lost by death two of our members—Mrs. House, of Hamilton, and Mrs. McQuoid, of Toronto.

In presenting our report for the year, we do so with deep regret that more has not been accomplished. The Executive has held ten meetings during the year, at six of which there was not a quorum present, which of course seriously handicapped our work.

In December, acting in conjunction with the Local Council of Women, a circular letter was sent to each candidate for the Board of Education, urging the need for medical inspection of our Public schools, so that we feel that we have had some small share in bringing about this needed reform.

In March the Committee on Legislation prepared a letter on Registration, which has been sent to every nursing organization in Ontario, so far as known, also to many hospital Superintendents and others, in the hope of increasing the interest in our work.

During the year an application was received from a society in Brockville, asking for affiliation with the G. N. A. O. This was left over pending the addition of a clause to the By-laws which should deal with the subject of affiliation. It does seem that something along this line might be done with our very numerous nursing organizations, to the advantage of both the small and the large society.

In the midst of many discouragements your Executive has striven to keep before it the main object for which this association was called into existence, viz., registration. The apathy of the great majority of nurses, however, is the most discouraging factor with which we have to deal.

Our roll now numbers 223. Of this number 15 are new members this year; 100 are resident in Toronto, showing that much greater interest should be taken in the work of this association by nurses in our midst. It is difficult to keep up the interest with meetings only once a year. With co-operation or affiliation with other nursing societies, could we not have more frequent meetings? Is it not a mistake to hold our meetings always in Toronto? We have the invitation to hold our next meeting in Hamilton, and we hope the association will see fit to accept this.

Respectfully submitted.

JULIA STEWART, Recording Secretary.

The Treasurer's report was read, as follows:—

DISBURSEMENTS.

1909—May.	Katharine De Witt (expenses)	$ 8	35
May.	Mrs. Ham	2	00
June.	Cole's	9	52
July.	Brown & Stainton	1	75
July.	Miss J. Carter	5	00
July.	Miss J. Stewart	7	50
Aug.	Brown & Stainton	15	85
Aug.	Acton Publishing Co.	8	35
Nov.	Acton Publishing Co.	8	32
1910—Jan.	Acton Publishing Co.	4	16
Mar.	Local Council Fee	2	00
Mar.	Charter Fee	1	00
Apr.	Brown & Stainton	8	25
May.	Brown & Stainton	8	15
May.	Canadian Nurse Pub. Co.	4	16
May.	Stamps and P. C. (Treasurer)	4	25
		$98	61

RECEIPTS.

1909-10.				
	On hand			$167 15
	May.	Fees	$38 00	
	June.	Fees	3 00	
	July.	Fees	41 00	
	Aug.	Fees	15 00	
	Sept.	Fees	9 00	
	Oct.	Fees	7 00	
	Nov.	Fees	....	
	Dec.	Fees	3 00	
1910—	Jan.	Fees	14 00	
	Feb.	Fees	9 00	
	Mar.	Fees	5 00	
	Apr.	Fees	8 00	
	May.	Fees	17 00	
		Total for year		169 00
				$336 15
	Balance			174 61
	Interest to date			3 20
	Fees			169 00
				$346 81
	Total Receipts			$346 81
	Total Disbursements			98 61
	Balance in bank			$248 20

Correct:

L. C. BRENT.
K. MATHIESON.

REVISION OF CONSTITUTION.

Miss Kennedy presented and read the report of the Committee on Revision of the Constitution and By-laws.

Miss Kennedy then read the following:—

Notice is hereby given of motion that the following changes be made in the Constitution and By-laws of the Graduate Nurses' Association of Ontario:

1. That Clause II., of Article III., of the Constitution, be changed to read: "The Executive shall consist of the officers and sixteen Directors, from whose number shall be appointed an Assistant Secretary, the Chairman of the Standing Committees, one representative to the editorial board of the CANADIAN NURSE, and one to the Local Council of Women, making twenty-two members in all."

2. That in Article VII. of the By-laws, Clause I., the words "May 30th" be changed to "June 30th," and that the following clause be added: "No one is to be considered a member who is more than one year in arrears."

In Article IX. of By-laws, that Sections D and E be omitted.

4. That to Article X. be added the following clause: "Other societies wishing to affiliate with the Graduate Nurses' Association of Ontario shall send application to be considered at the Annual Meeting, affiliating societies to pay an annual fee of ten cents per member."

Changes 1, 2 and 3 were adopted without discussion.

Miss Crosby moved, duly seconded, that other societies of nurses outside of Ontario wishing to affiliate with the Graduate Nurses' Association of Ontario, shall send application to be considered at the Annual Meeting, affiliating societies to pay an annual fee of ten cents per member.

Miss Ewing moved in amendment, seconded by Miss Devellin, that the amount be 25 cents per member.

The Secretary—Madame President, we are affiliated with the Local Council of Women, and we only pay $2 a year, and we have over 200 members.

Mrs. Clutterbuck—It seems to me we should not quibble too much about the amount. It seems to me that with the larger membership throughout the Dominion, and the knowledge we might gain from others, and what might be given us from their experiences, might be worth something more than the money we are talking about; and there is the other side to it, if we get the women interested we would probably get their money. I think the first thing is perhaps to get the interest, and then the money follows.

The President—I should think any nurse might become interested.

Mrs. Saunders—I quite think I could get others interested.

The President—I am sure we will be pleased to have your assistance.

Miss Crosby then read the original motion, as follows: That associations of nurses outside of Ontario wishing to affiliate with the Graduate Nurses' Association of Ontario shall send application to be considered at the Annual Meeting, affiliating societies to pay an annual fee of ten cents per member.

Mrs. Paffard—We do not need to say "outside of Ontario."

The President—Is there any objection to making it clear in that way? It takes so much consideration if the matter is not very clear. It is simple enough that our association is the Graduate Nurses' Association of Ontario, but still, is there any objection to specifying that? Then we would not receive applications from societies in Ontario.

Mrs. Tilley—I quite agree with Madame President. Some of us down in the Maritime Provinces are interested.

The President put the amendment, increasing the fee from ten to twenty-five cents, which, on a vote having been taken, was declared lost.

The President then put the motion, "That other associations of nurses outside of Ontario wishing to affiliate with the Graduate Nurses' Association of Ontario, shall send application to be considered at the Annual Meeting, affiliating societies to pay an annual fee of ten cents per member," which, on a vote having been taken, was declared carried.

REPORT OF LEGISLATION COMMITTEE.

The President—I shall now ask Miss Stewart to give you a report of the Legislation Committee.

Miss Stewart—I am not on the Legislative Committee, but I know in March a letter was drafted by that Committee on the subject of registration, and sent to every nursing organization and every alumnæ association as far as known throughout Ontario, and to many Superintendents of hospitals that are not members of our Ontario Association, in the hope of interesting them in the subject of registration.

PUBLICATION AND PRESS COMMITTEE.

The President—Miss Stewart will give you the report of the Publication and Press Committee.

Miss Stewart—I did not prepare any report. The Publication Committee has reported the meetings of the Executive in the CANADIAN NURSE each month.

The President—I would like to ask Miss Stewart to read a short notice.

Miss Stewart then read the following notice:

"Owing to His Excellency the Governor-General being unable to be present, the meeting arranged for the formation of an Army Nursing Reserve for Canada, to be held at Convocation Hall, Wednesday, May 25th, at 11 a.m., will be held at the Nurses' Residence of the Hospital for Sick Children. It is expected that the chair will be taken at 11 o'clock Wednesday morning by His Honor the Lieutenant-Governor. The public and all interested are welcome."

Miss Stewart—The Trustees and officers of the Toronto General Hospital request the pleasure of the Canadian Society of Superintendents of Training Schools for Nurses, and the Graduate Nurses' Association of Ontario at the closing exercises of the 28th Graduating Class of the Training School for Nurses, to be held in the amphitheatre of the hospital on Friday afternoon, May 27th, 1910, at half-past three, reception from 4.30 to 6 in the hospital grounds.

MEDICAL INSPECTION OF SCHOOLS.

The President—I will ask Miss Rogers to give her report.

Miss Rogers—Madame President, Association and friends: I do not know that I can give a report on the work we are doing here in Toronto, but I will speak a few words on the medical inspection of schools in general, and particularly the school nurse. The medical inspection of schools, as you all know, is of very ancient date; the ancient Egyptians and Grecians had teachers skilled in the art of curing, who looked after their pupils. Then we hear very little of it until 1842, when the laws of Paris ordered that all the public schools should be visited by a physician, who would inspect the school children as well as the buildings. From that time until 1894 not very much is said about the medical inspection of schools, but we find then in that year the London County Council had nurses visit their schools and take care of any minor contagious diseases among the children. It was very superficial work at that time, and it has undergone some changes since. In that year Boston took up the work and appointed medical inspectors, who inspected the schools regularly. In the following year, 1895, Chicago instituted a system of medical inspection, and New York followed in 1895. This was brought about by an epidemic of scarlet fever, which was caused by a small boy pulling pieces of skin from his hands and passing them among his fellow playmates.

The system at first was very superficial. The doctors reported at certain schools each morning and received from the Principal a list of the children who were absent on account of sickness, or who were sick in the schools. From that time nothing was done with the child; he was sent out of school, sent out with a certificate saying that he or she was not able to stay in the school, and while nothing was done to hlep the child when sent out to school, he played on the street with the other children as they came out of the school. This went on until 1902, when in New York City we found 300 children out of a single school at one time with various skin troubles, sore eyes, etc. The problem was very serious, and the

Department of Education appealed to the Department of Health, to see if something could not be done to get the children back in the school. The Department of Health said there was nothing they could do, they were carrying out the regulations of the law.

The question came up before Miss Wald, of the Nurses' Settlement, who suggested a skilled nurse, as they had in London. The experiment was entrusted to me. I began by taking a group of four schools in New York City. I asked the Principals of the schools for a list of the absentee children, and I found in going about visiting the homes some children had been out of school two whole terms with small scabs on their faces. It took only three or four days to get them in proper condition. One child had been out because her head had not been cared for. She told me she had a step-mother, and when I spoke to the step-mother she said she couldn't take care of it. With instruction to the step-mother and treatment of the child we got the child back in the school. We found, in going through the homes, very serious conditions. One of the nurses found in one of the homes she visited, looking after a child who should have been in school, a man in the last stages of tuberculosis, lying on a couch covered with clothes being sewn for up-town stores. This case was reported to the Tuberculosis Society; they went down and found this room without a bit of ventilation; the only light it had came in through the glass panels of the door; several children were living all in this one room. We found many other cases. We found children sent home from school with scabies; nothing was done for them in the home, and they were sewing on these same clothes. A large number of the population in the east side of New York sew for a living, especially the Jewish population, and the children are taught to sew and put the clothes together, and this is what the children were doing, and nothing being done, and, as I said before, the children losing their schooling.

The doctors in the beginning of this new inspection made routine inspection; that was later on turned over to the nurses, and the nurses went into the class rooms, stood by a widow where they could get as good light as possible, and had the children pass in front of them individually. It was a very superficial examination. They glanced at the child to see whether the skin was all right, whether the eyes were in good condition, to see whether there was any trouble with the ear, looked at the teeth and hands, and any child who had anything out of the ordinary was referred to the doctor for diagnosis when he made his visit each day. The nurse treated at the school all these minor contagious troubles that could be treated in the dispensary, and the child was kept in school; he lost only these few minutes from the class room that it took the nurse to treat the child. That was the system as carried out in New York. I find in going about in different cities that the conditions are different. When I left New York, after being there six years, I went to Pueblo, in Colorado, and found conditions entirely different; there were very few skin troubles, very little trachoma, which is highly contagious, and a disease which the nurses in New York were not allowed to touch, but we did find a large percentage—75 per cent.—of defective vision, enlarged tonsils, etc.

Here in Toronto we are just beginning, and we are not all there, as the expression goes; the doctors have not been appointed, and of course we are handicapped here. I can only go through the schools and see what there is, but I think there is enough to guarantee the system. I think it will be only a short time till it grows tremendously. There are a number of skin diseases here, a number of defective eyes, and a great many other things that can be remedied by the different associations if we can get around to them, but I cannot make any report on that, because the reports are not out yet. I have given just a very concise report of this work as it is being done. A number of nurses here will eventually become school nurses, because it is new work, and this is bound to be carried out in every town and city in the Dominion. It will not be long till legislation comes about. So that I would be very glad if you would ask me some questions on this work, because it must be of great interest to you—it is to me—and I would like you to carry back to your own towns or cities an idea of what this medical inspection should be, and evolve a system of your own. (Applause).

Mrs. Paffard—I would like to ask Miss Rogers if she would tell us something about her plan of work; if she acts under the direction of a medical superintendent, and if she interviews the parents of the children.

Miss Rogers—I think that is an important question. I forgot to say that there is a question as to whether the system would be better under the Board of Education or under the Board of Health. I have tried it under both systems. In New York we were entirely under the Department of Health. In Pueblo it is under the Board of Education, and I think it is infinitely better under the Department of Education in every way, because they control the schools; and the Principals in the schools feel if you belong to their department they can ask you to do so much more, and can enlarge; the Department of Education will allow us to take up anything that has to do with the health of the child. The Department of Health, on the other hand, looks essentially after the contagious end of it. The doctors, of course, will make a physical examination of the children, as Dr. MacMurchy has been doing here, and we will visit the parents in the homes. The visiting in the home is the most important part of the work, to explain to the parent what is the matter with the child and why and how the child should be taken care of. We ask them to send the child to their own family physician; if they have none, we either direct the Department of Health or someone outside to take care of the child.

The President—I will ask Miss Hamilton to speak to us on the work of the Heather Club.

Miss Hamilton—I will call on Mrs. Clutterbuck, the Secretary.

REPORT OF THE HEATHER CLUB.

Mrs. Clutterbuck read the report of the Heather Club, as follows:

REPORT OF THE HEATHER CLUB OF H. S. C. A. A.

The Heather Club was formed a year ago by the Alumnæ Association of the H. S. C. for the purpose of looking after tubercular children in their homes. The first visiting was done by volunteer nurses from the association, and the first patient was a little girl who had suffered in the hospital from tubercular pneumonia and been discharged. The visiting nurses were to instruct the mothers in the care of the sick children, the prevention of the spreading of the disease to other members of the family, provide means of their getting fresh air daily, supply suitable nourishment—milk and cream—and provide clothing suitable where needed. As the work has grown we have found it wisdom in one case to provide a splint, in another a mattress, also bedding, blankets, etc; in some cases groceries and other household needs have been supplied, for which special donations have been given.

During last summer, through the kindness of Mr. Robertson and Miss Brent, a verandah was set apart for the use of our patients. This year we are to have the use of this verandah for the girls, and have the privilege of erecting a shack, the plan of which is ready on the grounds at the Island. We need more money than we have for furnishings. Our work has grown; busy nurses could no longer spare sufficient hours from their active duties to see the patients. Miss Charters most kindly came to our aid, though we could only add a mite to her salary she has put both heart and back into the work, and to her zeal we are greatly indebted. She has done the visiting, with what assistance our members could render, and to her practically all of the success of our effort is due.

To Miss Neilson we owe much for sending us patients. Our object is to care for the children under 14 who are ill, also to watch those children with whom the tubercular afflicted come in contact, bring them to the clinic, and prevent their becoming infected. For this work, also to watch convalescent patients, a Visiting Committee has been formed, with Mrs. Burland as Convener.

During this year we have visited 21 patients, making over 250 visits; distributed cream, 25 quarts; milk, 620 quarts. Spent $145 on food, clothing, etc.; collected or had donated, $387 in money, beside sclothing, boots, shoes, groceries, etc., etc. We have three Life Members who have paid $25 and donations, one Honorary Member paid $5 and donations, and have 75 members. Our membership fee is 25c per year and donations. The club is anxious to have every nurse an active member and each of her friends active members; then we will be able to do for the children what we want to do and what these frail ones need. We have in our mind's eye day camps, night camps, fresh air schools, education, right living, right thinking, opportunities for these weak ones to learn to live.

I am sure you all feel this is an attempt at work that is worth while. We are the baby society, just a year old, just feeling our way. Will you not all join us, give us your help in our every effort, and build up a club that can care for these much-neglected children? We so much need you all to help us.

MARGARET CLUTTERBUCK.

SPECIAL WORK AMONG TUBERCULOSIS PATIENTS.

The President called on Miss Neilson, who read a paper on the Special Work of Nurses among Tuberculosis Patients.

THE WORK OF THE VISITING NURSE AMONG THE TUBERCULOSIS POOR OF TORONTO.

There are at present in Toronto three nurses who are doing special visiting work among the tubercular poor. They are working, respectively, under the auspices of the National Sanitarium Association, the City Board of Health, and the Heather Club, the Heather Club sharing, as you have heard this afternoon, the services of Miss Charters, the Visiting Nurse of the Sick Children's Hospital.

There are, so far, two free dispensaries for the tubercular—one at the General Hospital, having two clinics a week; the other at St. Michael's, open on one day. By an arrangement made a week or so ago, the National Sanitarium Association have given the services of their nurse, Miss Creighton, to St. Michael's, and she will now attend the clinics and do the visiting in connection with their work. I, as City Nurse, attend the clinics at the General Hospital and keep in touch with their out-patients, but both Miss Creighton and I are free to accept any patient reported to us from any source. There is no special dispensary for tubercular children, but many attend both St. Michael's and the General Hospital clinics, and after diagnosis has been established they are handed over to the care of the Heather Club. And may I say, out of sheer gratitude and admiration, that for concentrated effort, kindness and wisdom in handling its cases, the Heather Club can hardly be surpassed.

We have also in Toronto the newly formed League for the Prevention of Tuberculosis. They have opened in the City Hall an office, where one or two of their most enthusiastic members give their services and attend for an hour or two each day to receive reports of needy cases. They have distributed an excellently prepared little sheet of instructions for the consumptive, and they have, as I can most gratefully testify, given relief in many destitute cases.

This, exclusive of the great work done at Weston and Gravenhurst, is the armament, so to speak, in the campaign against tuberculosis in Toronto, a city of nearly four hundred thousand souls. Is it adequate? Does it begin to be adequate? No, most decidedly not; but it is a beginning, and let us hope a strong and healthy beginning, destined to make a vigorous, if slow, growth.

What, then, are we visiting nurses able to accomplish? Speaking for myself, I must confess that the results of my work fall far below even what I might expect from such energy as I have expended. Poverty is perhaps the greatest drawback; ignorance is another, and a deeply ingrained habit of unwholesome and unsanitary living is another.

Take the case of poverty, for instance. I have a patient, a man who returned last summer from Weston, after a three months' stay which had been productive of very good results. He had to work, as his wife was in delicate health, and could look after the family of three children no more. Two or three positions were obtained for him, but proved too hard. At last he got light work around a stable, and for this he receives the munificent sum of six dollars a week. He and his family move from one tumble-down cottage in a lane to another in a rear. They are always unsanitary in the extreme, because he can't pay more than five or six dollars a month's rent, and five or six dollars does not rent nice, fresh, airy little cottages in Toronto. He has done wonderfully well so far, but sooner or later his resistance must be broken down, and he will lose ground. What are we able to do for him then? We give him milk, eggs, cheesecloth handkerchiefs, and good advice in plenty. Even if I could procure a tent or shelter for him, I can't ask him to sleep out of doors. His dwelling always just touches the lane in front, and as for the back yards—well, I should not like to sleep in any back yard he has had. He cannot move far enough out of town to be where purer air may be obtained for as little as he is paying now, for there is car fare to be considered. His wife is not able to add much to the family income, for babies continue to come without abatement. I am afraid to ask him to change his work for something in some more healthful part of Toronto, for fear I shall not be able to get him anything as easy as what he now has. I still hope to see a better state of affairs in this man's case, but in the meantime he is not improving physically, and his wife and children, under the hideous clutch of poverty, are developing into accomplished beggars. And this case is only one of many. I am afraid to say how many mothers I know, or have known, who are working or have worked themselves into their graves. You cannot pay out a dollar and a quarter a week to a laundress when your husband's wages are only seven, eight or nine, neither can you spend most of the day on a couch by an open window or on a bench in the park, when there are four or five little mouths to be fed, and four or five little bodies to be clothed, and you are absolutely the only one to do it.

This, then, is one great drawback to the successful carrying out of the work in the patients' homes. It is true that we often can arrange to have our incipient cases go to Gravenhurst, but after a four, six or eight months' term they return, not cured of course, but well on the way to a cure. And with the homecoming much of the good is undone, because of the necessity of working and because of the poor home surroundings.

Ignorance, I have mentioned, as another drawback I meet with. How often, after an eloquent outburst from me, enlarging on the cause, cure and prevention of tuberculosis, I have been met with the remark: "Say, did you ever hear of Higgins' Sure Cure for Consumption? It costs three dollars for one tiny, little bottle, but my, it is awful strong! I wish some one would help me to that three dollars." Or if not that, perhaps it will be this: "Now, there's no use in telling me that consumption ain't hereditary. No one will ever make me believe it's catching, when I know for a fact it is inherited. And if you have inherited it you might as well give up, for you've got to die when your time comes." And another time, when trying to persuade an irrascible old mother-in-law that her son-in-law must either go to Weston or take to his bed and be carefully nursed, she said to me: "Now, this is the beginning of the summer, and he's got to go to work until the autumn. He is not going to die now. Neither you nor anyone else ever heard of a consumptive person dying, except in the spring and the fall."

I spoke of a deeply ingrained habit of unwholesome living as another drawback, that we find chiefly among the Jews and other foreigners who make up fully one-half of the visiting list. One little Jewish woman has been haunting the clinics with rather troublesome regularity. She complains of night sweats, weakness and an occasional cough, but if there is any tubercular lesion in the lungs it is so obscure that our doctors have not been able to find it out. When I have called on her in her dirty little four-roomed house in the Ward, she has maintained a delicate reserve as to her mode of living, and was rather hazy in her answers as to the number of people living in that house. One day when I called, she told me that she was thinking of going back to Austria, where there were big doctors—professors who might be able to throw more light on her interesting but elusive trouble than the doctors in Toronto, and who might be able to hit on the right medicines for such a case. "Now, Mrs. Polinski,"

I said, "you might save your three hundred dollars for the trip, and move into a better house, in a better part of the city, and have it all to yourself, and then I think your health would improve. Now, please tell me how many people you have living in this house?" "Well, Miss Neilson," she said, "I'll tell you the troot. We have eleven boarders; four men in one of the front rooms, four in the other, three in the kitchen, and my husband and the children in the room off the kitchen. And I cook for them all and wash for them, too, and I only get six dollars a month from each man."

I wish you could see that house; so tiny you can hardly turn round in it, and only four beds for those fifteen people. The washing, as far as I could judge from the appearance of the men's clothing and the bed linen, or rather the absence of bed linen, could not have been an arduous performance, but I should not have cared to have undertaken the cooking for such a number of gentlemen, primitive as Mrs. Polinski's methods might have been. And then I'm supposed to keep an eye on Mrs. Polinski and see that she lives properly. Long talks have I had with her, trying to persuade her to forsake her present mode of living, but she says she is poor, very poor, and she needs the money, for her husband is all the time sick and cannot do much work. Not much wonder, I tell her.

I could multiply story upon story of such cases, but the time is limited, and I should like to tell a little of the good our work can accomplish.

First there is the making of arrangements to send patients to Gravenhurst or Weston. By means of the attendance at the clinics the earliest cases are found out and sent to Gravenhurst before it is too late, and every advanced case goes, if possible, to Weston, and there is then no danger of their infecting their friends. Without the sanataria we should be minus our right hands. I cannot conceive of working under harder conditions than that of pursuing our work in a community where sanataria are difficult of access, or where, worst of all, the door is closed to advanced cases. And so to Weston and Gravenhurst I am deeply grateful.

Then, if my path through the city is not always followed by a mushroom growth of tents, shacks or other shelters, or by a migration to the healthy outlying portions of Toronto, still there is something of the sort. Just at present I am watching with as much pride as the owners, three or four beautiful gardens in the north of the city. They belong, respectively, to a family that moved out of a cellar on Church street; to a family that moved out of two rooms with windows opening on to a closed well, the house being in a much congested portion of the city; and to two families that moved out of houses in the rear. The houses attached to these gardens are small, but bright and sanitary, and the gardens themselves furnish wholesome and delicious additions to the table of people whose means are very limited. They prove a joy to the men of the house, as they care for them; are a means of rest and happiness to the delicate wives, and will, I hope, be a source of moral as well as physical strength to the children. And it is a pleasure to feel that it was through our persuasion that these people left their unsanitary quarters, and in at least two cases it was due to us that the advance rent and expenses of moving were found. As it was with my unsatisfactory cases, so I could multiply stories of my satisfactory ones. I could tell of the deep human interest that lies in the work, of its rewards of gratitude, appreciation and good results. That very gratitude and appreciation make one ashamed of one's feeble efforts, and the more anxious to prove worthy of them.

I know this is not the time nor occasion to make an appeal for our poor sufferers, but I cannot resist a word or two. Surely nurses, of all others, who know the horrors of a lingering illness, surely they could in some way identify themselves with the social service work. The noble efforts of the Sick Children's Hospital Alumnæ in the Heather Club could be duplicated, if not in like manner, in like end and aim, by many an alumnæ association that has heretofore worked only for itself.

They say that the consumptive is always cheerful and hopeful. No, not always. To anyone who has seen the blank despair of the father when he knows that he leaves his children unprovided for and the mother to fight the battle for existence alone; the anguish of the mother when she realizes that she shall no longer care for the children who are more to her than life itself; the grief of the young when it comes upon them that their high hopes and happy dreams will never come true;—to anyone who has seen all this there comes a great longing to be able to take some little part in the campaign against tuberculosis, a preventable disease.

JANET NEILSON.

THE COBALT HOSPITAL.

The President—I will now ask Mrs. Saunders to give us a little talk on her hospital in Cobalt.

Mrs. Saunders—If I can do so, Madame President, I will try to make a short address, but you must not expect very much, as I am not accustomed to speechmaking.

I went to Cobalt on the 17th April, 1907, and on the 18th May we had an explosion which wrecked all the houses around, and made about 150 people homeless for a matter of ten days. I was the first nurse who went into Cobalt. None of the doctors nor anyone knew I was a nurse, because I had not intended to take up that work. My intention was to lead rather a quieter life and to leave my nursing behind. I came from England after having had a very severe illness, and the doctors advised me not to take up any strenuous work for a

long time, but it was forced upon me. Unfortunately I didn't know what I had to contend with. The idea, of course, was to work in a private way among private cases. I was mostly placed amongst the French and foreign element. For about six months I was handicapped by not being able to speak to anyone in my own language. I did not go about very much, but by degrees the patients were brought to me when they knew there was a nurse in town. I was the only woman nurse at that time who could attend under a doctor's instructions upon medical and surgical cases, but there were numerous difficulties to contend with. We hadn't the water, and we had to fetch it from the creek and carry it as best we could in all sorts of vessels, and we were short even of that kind of things, and we had to boil the water and strain it before we could give it to the patients; also we had to dig in the ground and bury all the excreta.

Everything was very amateur to begin with, and having one's home wrecked, all my resources were wrecked as well, and I could not work with those things which I had brought from England. But, as time went on after the explosion, the people got to know it was really a great relief to keep the patients clean and attend to them. There were quite a few mines, but they were only recently established, and they had not had any accidents until June 18th, when the captain of the La Rose Mine, during blasting, was very badly injured, and I brought him down to the Toronto General, and that was the beginning of Cobalt's history with reference to bringing patients down to Toronto, although I expect now there are lots in this audience that have had patients from Cobalt in most of the hospital wards. Our efforts were very amateur, but as time went on the mine managers realized the great need for a hospital, however small.

I began with one bed, and that was christened with a case of appendicitis, and there were three doctors brought from South Lorraine. We had to wait many hours before a doctor could be brought in, and the patient had been lying a number of weeks without any real aid, and the case was too far advanced, and the doctor saw, to his dismay, he could not proceed to do any good. The doctor said, had the man been operated upon earlier it would have been, from a doctor's point of view, successful. It was not a very nice beginning to have one's first case lost. Since that time I have not had really time to sit down and write or think of anything, because one thing follows upon another. Having started my little hospital with one bed, it gradually grew till we had thirteen. I came down to Toronto and found a graduate nurse. To get a nurse was paramount. I managed to get one for ten weeks, and she really helped the hospital to what it is now. Without her efforts I could not have done what I have done. Still, the hospital grew and grew, and I made four moves. I was burned out the first time, and the explosion wrecked the second one, and the third time fire came. The fire fortunately did not destroy the hospital, and it was very providential it did not. Then following that was the epidemic of typhoid, which I suppose most of you have become aware of. With so many in a small place, where nurses were very scarce, it made it very trying, but I had the united efforts of most of the hospitals in Toronto, and in Ontario; they sent their nurses, I think almost on 24 hours' notice, and in the majority of cases every nurse was very successful. The most of them liked the work, but of course there were some who did not like the work; some would only take certain cases. Nurses that make nursing their profession must forget about the high fees for the time being if they want to help humanity. We cannot gain from experience if we are going to gain always by the pocket. I can assure you we have quite a nice hospital now, which, from one bed, in three years has grown to 80 beds. We have just got the patients back from the tents in which they were placed, and everything is nice and clean, and the hospital is renovated.

I feel honoured to attend this meeting. I have been asked three times to attend a meeting in Toronto. It has given me very great pleasure, and I feel it an honour to come to this meeting of the Society of Superintendents of Canada. The mine directors have sent me down to get ideas and learn from others. I am very anxious to get any ideas that I can pick up, to help my own hospital, or to help any nurse in any possible way. I have three Toronto General graduates and a novice nurse from the Toronto General, and I have one from Ottawa, and two from St. Luke's, in Ottawa; I have five probationers and three seniors. It is really the result of three years' work. It has not been alone; it has been by united effort. In 1908 I had worked as hard as I could work, and I was laid aside for eight weeks with acute rheumatism, and then the Town of Cobalt understood the need of coming to the aid of the hospital. On our books we have about 4,000 men, and out of the 4,000 we generally get a number of surgical cases; we treat the medical and surgical cases and the isolation work for the mines. We have about forty mines, and each man pays into the hospital fifty cents per week.

I started the system when I was very poor. No one paid for a time; they thrust the patients on us, whether they were town cases or not, and did not trouble to pay for them. When a case came in it would mean that you had to see to everything and get everything for your patient and assist the doctors in their work. We had to do that for the simple reason that in the early days there was nobody else to do it. So that in 1908 it was a very important time in my life, but I have made such splendid friends, and have had such thoroughly honest and reliable nurses, that I speak with great gratitude, and I am sure I could not have accomplished anything if it had not been for the united efforts of the nurses, especially during the epidemic of typhoid.

Cobalt has a very great name for wealth, but I can assure you there is a great work to be done in Cobalt. Conditions are very bad in the houses. I would like to get a recognized and organized system of distribution. In Cobalt house rent is very high, and the conditions are not sanitary; they were dreadful, but they are better than they were. Lately more interest has been taken in the nursing scheme from sheer necessity.

My work now is easy. The directors have taken the hospital over from me, and they are paying me in a year's time the proceeds for my work. I don't mind, so long as I can see the work is improving. Whoever succeeds me I think must improve much on the methods.

I am afraid this is not a very interesting talk, but I am not accustomed to speaking publicly; I am more fitted to do practical work than to speak in a public way. I thank you all very much for listening to such a weary detail. I cannot relate to you the incidents I would like to, because it is taking up too much space, and possibly I have not the best way of cutting it very short and making it concise.

Mr. Jones, the President, told me he wanted me to come down and not worry myself about speechmaking unless I felt I could do so. I thank you one and all for giving me this invitation to be amongst you.

Mrs. Downey—I would like to take this opportunity of thanking Mrs. Saunders and the medical profession of Cobalt, and the laity, for the great consideration and kindness that the nurses from the Central Registry got when they went to Cobalt during the time of this epidemic. Calls were sent to the Registry from Mrs. Saunders, possibly from different members of the Board at Cobalt, and from private individuals there, and I am glad to say the Central Registry was able to respond to every call. The nurses responded promptly to the call of duty, and all that went up there knew they were going, as it were, in time of war, and went to do their duty, and I am glad to say they wrote me that the consideration and kindness shown to them by the members of the profession and also by the laity was very great. The work was hard and the means very crude, and the trials were great, but at the same time they were treated very well and everything done to make their life as pleasant as possible. The Central Registry thanks the members for all their kindness.

The President—The meeting is now open for any discussion. I think Mrs. Paffard has something to say.

Mrs. Paffard—I am afraid I am something like Madame President, with reference to her address this afternoon. She is afraid she is going to have bad friends after it; I am afraid I will be in the same position.

MRS PAFFARD'S PAPER.

Mrs. Paffard then read the following paper:

Madame President and Ladies:

I would like the opportunity of bringing before this meeting a subject that has for some time been painfully evident to me, and, I have reason to believe, to many of the older graduates. I refer to the deplorable lack of a sense of professional ethics in very many of the more recent graduates from our schools.

It was my privilege yesterday to attend the Convention of Superintendents of Training Schools, when this subject happened to be touched upon, and I am not sure from what was said that there are many who feel as I do on this matter. I feel that it is a subject that should engage the very serious consideration of this association and everyone who has the welfare of the profession at heart. I therefore trust that I will not be considered pessimistic if I speak plainly on this question.

When one hears with increasing frequency of graduates of our best schools confining their services to only certain cases to their liking;

When one hears of graduates declining cases on account of the colour or nationality of the patient;

When one hears of graduates declining to take cases except in fashionable quarters of the city, and then only on an assurance that there shall be a stipulated number of servants in the family;

When one hears of graduates declining absolutely to take any cases in the country;

When one even hears of graduates having friends send them false telegrams to recall them, so that they can drop a case not entirely to their liking;

In short, when one hears that graduates are demanding the privilege of having their cases "hand-picked," so to speak, surely there is something wrong with their education. Surely the ideals of the profession are in very grave danger—the ideals which have inspired and actuated the army of noble women whose loyalty, devotion and self-sacrifice have in the past so dignified—I might almost use the word "sanctified"—the profession of nursing.

Just for a moment imagine what your conception of the medical profession would be if its members claimed the privilege of selection of patients! If its members were actuated and governed solely by such a spirit of commercialism!

Surely the demands for loyalty, devotion and self-sacrifice which are being met to its great credit by the medical profession, should bring an equal response from the members of its sister profession.

Now, in the discussion on this subject that took place at yesterday's meetings of Superintendents, it was suggested that our association could largely help to educate nurses

to a higher sense of their calling. I believe that it can, but will deal with that a moment later. I think, however, that one must first look for a cause or reason for this deplorable tendency amongst so many of the more recently graduated nurses. Is it not an indication that the ideals and ethics of the profession are not sufficiently inculcated in the undergraduates? I cannot believe that this is being done in the training schools to the extent that it should be done, nor to the exten. that it was done a few years ago during the course of my own training. I think that there are many of the older graduates present who will corroborate me in stating that we felt it our duty to accept any case that offered, quite irrespective of colour, nationality, location—or servants. And I think that I may go further, and state that the very lack of servants or conveniences was in a measure the stronger call for our services. That, in my opinion, is the spirit that should be implanted in every undergraduate. And in this connection I am going to submit a resolution which I shall read to you in a moment.

Now, if the undergraduates are taught the importance of taking an active interest in association work from the day they graduate, we few who have struggled to increase the membership and consequent effectiveness of our association would meet very much fewer discouragements. The indifference that we find to association work in the more recent graduates —who should be the most enthusiastic—is one of the most discouraging features that we have to deal with. The time to educate the nurse is during her course of training—not after she has graduated and drifted apart from her sisters in the profession. If the Superintendents of Training Schools would instil the importance of association work to the nurse as an individual, and urge each and every pupil nurse to join her Provincial Association as well as her own Alumnæ Association, we would very soon have a large and enthusiastic membership, and to that extent we would be able financially and otherwise to undertake a carefully prepared plan of lectures to the classes of every training school in the Province. In this way we could and should co-operate with the Superintendents on the suggestion made at yesterday's meeting.

I will now read my resolution, and would ask that a full discussion be given to this subject:

"That in view of the marked decline of interest in nursing as a profession by the graduates of more recent years, this association feels that this reflects and foretells a lower professional standard, which must inevitably re-act, not only to the disadvantage of the training schools as such, but to the standing of the profession at large; and recommends that steps be taken by the Superintendents of Training Schools to more thoroughly inculcate in undergraduates the ethics of the profession and the importance to the undergraduate herself of taking an active interest in association work; and that a copy of this resolution be forwarded to the Canadian Society of Superintendents of Training Schools for Nurses."

The President—I think as our time is limited, in fact, it is just now up, we will have to leave this over until this evening, and we will bring the matter up for discussion this evening when we have a little more time.

You have now an invitation to adjourn to the theatre, where Miss Potts will give you a few demonstrations, and then you will return to the dining-room, where you have an invitation from Miss Brent to afternoon tea.

The demonstrations by Miss Potts, Assistant Superintendent Hospital for Sick Children, Toronto, were so practical and helpful that they excited the keenest interest on the part of all present. The interest was so keen and the desire to go and do likewise so strong that Miss Potts has very kindly furnished us with a minute description of each.

BOX-SPLINT.—Three pieces of board—length depends upon size of child. Depth 4 in. (this also depends upon size of patient). The two long pieces from about an inch below axilla to the feet. The third piece extends across the foot of the other two and is long enough to permit of the limbs being a comfortable distance apart.

Pad the frame with raw cotton. Place child in splint and bandage limbs to splint with ordinary cotton bandage, and trunk with abdominal binder. Child is thus kept perfectly quiet.

In male patients a urinal is improvised from small glass tube tapering at end. A rubber catheter is attached to this and carries urine to a pus basin. The tube is kept in place by a piece of narrow tape tied round the top and pinned to the binder.

HOT PACK FOR NEPHRITIS.—Where electric light bulb is used instead of hot air pipe or gas, the following articles are needed:

Ice cap.

Hot water bag and two covers.

Three blankets.

Two large rubber sheets.

Bed cradles (those made of steel, the inner side being covered with a blanket are preferable, as they bear the weight of the clothes better).

Bath thermometer.

Electric light (32 candle power), bulb enclosed in cage.

HOT DRINKS.—Directions: Cover the patient with a blanket, remove top bed clothes. Put over him a sufficient number of cradles to extend from his neck to his feet, and cover with rubber sheet. Draw out the blanket covering him and pass it over the cradle. Remove night gown. Apply ice cap to head, and hot water bag, covered, to the feet, which should be wrapped in small blanket.

Hang thermometer on cradle at the head. Draw the ends of the rubber and blanket under patient up over the cradle, and carefully and securely tuck blankets around patient's neck.

Tie electric light bulb to cradle at foot of bed at least 5 in. above patient's feet, making sure that the lower part of legs and feet are securely covered and apart.

The bath is generally continued for half an hour after the patient begins to perspire.

Note.—As soon as patient begins to perspire freely, turn off light. The after-treatment is same as for usual hot packs.

ECZEMA MASK.—This mask is made of cheese cloth, and is in two separate pieces. First piece fits over head and face 36 in. x 18 in. Cut holes for eyes, nose and mouth about 3½ in. from selvedge edge. Cut strip 12 in. x 1 in. on either end of selvedge to tie at back of neck. The second piece, 30 in. x 18 in., forms a hood for holding the face mask more securely. A fold of 2 in. on selvedge edge is turned back. Strips 8 in. x 1 in. are cut from lower selvedge edge to tie under chin, and similar strips from upper selvedge edge to tie at back of neck. The long ends of the hood are cut off at the back.

PHOTO OF DEMONSTRATION SHOWING PATIENT IN FOWLER'S POSITION

Make a frame length and width of standard bed. Fasten to this a support for the body consisting of three flaps hinged together. The one supporting the trunk is about 36 in. long, and the two smaller from 14 in. to 16 in. long. On each flap is laced a piece of stout canvas which can be tightened if necessary. The frame is then covered with a mattress or quilted pad.

The therapentic uses of the sitting posture may be roughly divided into two groups—operative and non-operative.

This position to be at all effectual must be maintained all the time. If the patient be allowed to slip down, even occasionally, the entire surface of the diaphragm will be periodically flooded with poisonous exudate. This is what happens when one tries to maintain a patient in the sitting posture by means of a simple back-rest or by pillows.

In the non-operative group there are cases of pulmonary and cardiac disease that may be greatly benefited and cared for more easily when sitting. The constant lifting is exhausting to attendants and patients.

The meeting then adjourned, to meet at eight o'clock p.m.

EVENING SESSION.

8 o'clock p.m.

The President, Mrs. Currie, called the meeting to order and requested Miss Stewart to read the announcement of the election of officers for the coming year.

Miss Stewart then read the list of officers for the year 1910-11, as follows:

President—Miss Bella Crosby.

First Vice-President—Miss A. T. Robinson, Galt.

Second Vice-President—Mrs. W. S. Tilley, Kingston.

Treasurer—Miss Mary Gray.

Recording Secretary—Miss E. Ross Greene.

Corresponding Secretary—Miss Louise Bowling.

Directors—Miss L. C. Brent, Miss A. J. Scott, Miss K. Mathieson, Mrs. Pellatt, Miss E. B. Barwick, Mrs. Downey, Miss J. Neilson, Miss J. C. Wardell, Mrs. J. C. Currie, Mrs. A. Yorke, Miss M. Barnard, Miss Ewing, Miss O'Connor, Miss Kennedy, Miss Jamieson, Miss De Vellin.

NOTICES.

The President—There are also a few notices to be read.

Miss Stewart—The officers of the Graduate Nurses' Association are invited to luncheon with Miss Brent at 12.45 o'clock to-morrow at the Residence.

The Home Bureau in the North Apartments, Suite 8, 755 Yonge street, Miss M. Gibson, nurses' outfits, infants, wear, physicians' and nurses' supplies. This is to be opened 1st June.

We have had sent to us a world petition to prevent war between nations. It is to be presented to the Governments represented at the Third Hague Conference. (Reads). This was sent to us to be signed, if it is your pleasure, by the officers of the association.

The President—You have heard the purport of the circular. Is it your pleasure the officers should sign for the association?

Consent was given.

Miss Stewart—This is a notice from the Treasurer to say that all nurses wishing to rejoin the Graduate Nurses' Association can do so by paying up arrears. (Applause).

The President—I think possibly it might be suitable to bring up the question here as to where our next Annual Meeting should be held. It may be a little previous, but there has been a proposition made that the Canadian Hospital Association hold their meeting next year on the 1st of July at Niagara Falls, and I understand that the Superintendents of Training Schools have a like invitation. Would the Ontario Graduate Nurses' Association like to hold their meeting at the same time and in the same place? Of course we have a previous invitation from Hamilton to hold our next Annual Meeting there, and this will have to be submitted to you. The only reason for the other place for the meeting would be the advantages derived from the meetings of the other associations being held there at the same time.

Miss Crosby—Is it decided that the Superintendents' Society meet at Niagara Falls?

Miss Brent—That is to come up to-morrow morning, Madame President; it is not decided yet.

The President—In the event of these two associations holding their meetings at Niagara Falls, would it meet with your approval that our next Annual Meeting be held there at the same time?

Miss Crosby—I think there are some Hamilton nurses here who would like to be heard from.

The President—Yes, I would be pleased to hear from them.

Miss Carr—I don't know that there is anything to be said on this subject. We will be very pleased to entertain the Graduate Nurses' Association in Hamilton next year. We are certainly looking forward to doing so.

Miss Crosby—I can speak for the Hamilton Nurses' Association, because I know how royally they received me when I went to visit their association on behalf of the CANADIAN NURSE, and I know they are deeply interested in the work of the CANADIAN NURSE and the G. N. A. O., and I feel certain the association would not be sorry if they decided on Hamilton.

Mrs. Paffard—I know we had a very hearty reception at Hamilton when we went up to interest them in our association. I think at the same time it is most beneficial to meet all together, as I and others have derived some benefit from yesterday's meeting, and if Hamilton would allow us the privilege of accepting Niagara Falls next year, and promising them the year following, it might be arranged.

Miss Crosby—Perhaps if we decide on Hamilton, the Canadian Association of Superintendents will follow our example and come there too.

Miss Brent—We had better wait till we are asked. (Laughter).

Miss Carr—Madame President, may I speak again? There certainly seems to be some benefit in the meetings being together, and if the Superintendents' Society would like to come

to Hamilton, I am quite sure they will have an invitation and we will be very pleased to have them, so that our three meetings would be together the same as this year.

Miss Brent—I am afraid, Madame President, the inclination has been so far towards accepting the invitation to Niagara Falls. We have not exactly committed ourselves, but I think that is the idea at the present time. It might be a little bit premature for us to go to Hamilton till we found whether the Hamilton Hospital was in touch with us. I don't think you have a Superintendent appointed there yet. She might not feel particularly interested in us, so that I think it would be better for us to wait until such time as that would be settled before we decide.

Mrs. Pellatt moved, seconded by Miss Greene, that the matter be left in the hands of the Executive to decide. Carried.

PAPER ON REGISTRATION.

The President—I might ask Mrs. Pellatt now to read her paper on Registration.

Mrs. Pellatt then read her paper on Registration, as follows:

REGISTRATION.

Madame President and Sister Nurses:

Ladies,—Speaking to members of the G. N. A. O. on the subject of registration seems almost like carrying coals to Newcastle, as it would seem by this time all our members ought to be so well informed on the subject that it would be impossible to give them any new ideas. I will not pretend to advance anything new on the subject in this paper, but rather keep the old arguments which have been used so often since this association was organized—may I say, for the special object of obtaining registration in Ontario, as we were so forcibly reminded last year by Miss Eastwood. Four years ago, when our Bill was before the Legislature here, it was found that many nurses did not know what was meant by registration, and when it was mentioned confounded it with the Central Registry. To-day I fear it is the same, possibly to even a greater extent here in Toronto at least, as there are 350 nurses vitally interested in the Central Registry, but only a small proportion are interested in the subject of registration. Possibly the name is at fault, and if we spoke of "legislation" there would not be the same confusion. Therefore I shall so speak of it in this paper, and thus the arguments advanced may not sound so trite and thread-bare as otherwise they would to many here.

Let us for the sake of argument divide the subject into sections—1st, What? 2nd, Why? 3rd, Who? 4th, When? 5th, How?

1st—What do we mean by legislature? By the term legislature or registration we mean such legal act as will give recognition to the nurse who has graduated from a regular hospital. This with the title of "Registered Nurse," or whatever other title may be given her by the Act, will distinguish her from the untrained nurse or the graduate of the correspondence or short term school. It will not prevent these women from nursing, but simply separate the classes.

2nd—Why should we have it? May I ask if it is fair to make the nurse who has spent two or three years of strenuous work in a hospital, compete with one who has spent possibly but a few weeks, or at most a few months, in the study of nursing, and whose only qualification may be a uniform and cap? In other professions, such as law, medicine, pharmacy, teaching, when the welfare or health of the people is concerned, the State compels certain requirements and as a result the standard in each case has been raised and dignity added to the profession and those belonging to it. Very early in history, to prevent debasement of precious metals, Government established a standard of fineness which was maintained by law. In England this is called the "hall-mark." Here we have protection given us in the word "sterling" stamped on articles. It is possible to obtain cheaper silver, but if we want the best we look for the word "sterling." Thus the standard is maintained. So it is in professions, and so it will be in our profession when we obtain the right to distinguish between the registered nurse and the untrained nurse, between the "sterling" and the plated. In Canada possibly we have not the same situation to meet as in some other countries, as I have often heard the remark made—whether true or not, I knew not—that a higher and better educated class of women enter the hospitals here, and thus lend their dignity to their profession. Even so, should we not feel that we are in honour bound to do all we can to uphold this dignity?

3rd—Who will be affected by legislation? As there are two sides to every story, let us try to consider both sides of this story also and consider first those who will be favourably affected. Here we find the physician, the patient and the graduate nurse. The physician will be helped, as he will have a practical guarantee when he employs a registered nurse, that she can carry out his orders intelligently and faithfully. If she fails him, he will have the right to report the case to the Registration Board, and here also the nurse will be allowed to defend herself and not be left to bear the brunt of inuendoes and suspicion, as some nurses have had to do in the past. This will work for the good, both of physician and nurse. If any woman claims the title of "Registered Nurse" illegally, she can be punished, as the bill will provide penalties for such misdemeaner. The patients and friends have the same reason as

the physician for desiring legislation, viz., protection from imposters. There are cases on record where a sham nurse successfully imposed upon physician, patient and friends, carrying out no orders and declaring that the patient was delirious when he tried to report. The nurse herself who has expended time and labor in obtaining a diploma will have that diploma recognized and will not have to compete with the woman who has spent neither time nor labor in obtaining her knowledge of nursing.

On the other side of the story we have the untrained nurse herself. She has nursed possibly for years, and may feel that that experience ought to fit her for her work. No one will wish to deprive her of her livelihood, but only to ask her to work under her own colours. As "Honesty is the best policy" in all walks of life, although apparently some do not seem to think so, she will, by being true to herself and not claiming to have what she has not, be really benefitted, although not able to secure the same rates as the registered nurse. The small or special hospitals which do not come up to the requirements of the law will probably not be able to obtain pupil nurses, at least not when women learn that after their two years' work in these hospitals they will not be on the same footing as other nurses. These hospitals will object to any change in nursing, although experience has proved in New York State alone that these hospitals have found the Registration Bill a blessing in disguise, because it has compelled them to come up to the standard set by law, and thus increased the public confidence in them. Some hospitals organize training schools in order to have their nursing done cheaply, never considering the responsibility they owe to the women who give of their best to make the hospital effective. They fail to see their responsibility. In this connection we may mention the correspondence schools, which by specious advertisements placed in our best magazines deceive women and make them think that a few weeks' study at home is all that is required to put them on a level with the graduate of a hospital. These magazines, which claim in their editorials to have only the highest ideals for humanity, fail to see the harm they do in these advertisements in trying to deceive these women and making them deceive the public.

4th—When shall we obtain legislation? Just as soon as we really want it. Some of us wanted it four years ago, and tried to get it, but so many nurses did not know what was meant, or did not care, that we really cannot blame the legislators for not granting the request. Every nurse in Ontario should understand what legislation is and the results to be obtained from it, and then interest the physicians, the public and the legislators. The Woman's Council for the Dominion understands the question and is ready to co-operate when we are ready. With few exceptions the doctors will be ready to help when they learn what we want and that we have no intention of encroaching upon their work. Men of influence will help us when they understand our object, and here the nurse herself can bring her personal influence to bear when at work in their homes, as there are few families now who do not employ a trained nurse at one time or another. "Ask and ye shall receive, seek and ye shall find, knock and it shall be opened unto you," is the Scripture method of expressing it, while New Thought says, "I can if I will." If we really desire it, we will express our thoughts by our words and deeds. The great difficulty lies in the apathy of the nurses themselves. A few are enthusiastic, while the great majority are quite indifferent to everything pertaining to nursing except their individual interests, which they think are served only by having a succession of good paying cases—commercialism versus idealism—love to any profession when such a state becomes the main one, where ideals are lowered.

5th—How shall we go about securing legislation? The time and place for beginning the work is in the training school with the young nurses. As educationists claim that the first seven years of a child's life determine his future course, so the first few years of a nurse's life determine the attitude in which she will stand to her profession. In our training schools the nurses are taught their duty to the physician and the patient, and great stress is laid upon the duty of loyalty to their profession as such. If it were, would not the graduates pay more attention to the Alumnæ Association, the Ontario Association and to their own nursing journal? It is the broad-minded woman who is interested in these, and she it is who can do the most for her patient, since medical treatment alone is often the least good the nurse can do to her patient, and the good of the community at large lies in her power. In some hospitals the Superintendents take such an interest in these matters that all their graduates do the same. If there is apathy in the Superintendent, there it will be found also in the graduates who can see no need for such things, since their Superintendent, to whom they all look up, takes no interest in them. I believe that if the Superintendent of each training school will show her interest in the Alumnæ Association, the Ontario Association, the CANADIAN NURSE, and the subject of legislation, and impress upon her pupils the vital need of each, and also the responsibility of each nurse toward her profession, it will not be long before we succeed in our object. Let us keep our ideals high and work toward them, doing it with intelligence.

The G. N. A. O. was organized for the purpose of obtaining legislation, and each year in our meetings we have spoken of it and had reports. Last year Mr. John Ross Robertson, who has always taken such a deep interest in our work, made us the generous offer of providing for the necessary printing for our propoganda. Other plans were also suggested, as the sending of a nurse to the different towns to bring before them the need for legislation. What has been attempted and what accomplished during the year, we heard this afternoon. If little has been accomplished as the result of these letters sent out, let us not be discouraged, but

resolve that we will have a very different report to make at the session of 1911. Let this be an individual matter as one for the association. Let each nurse study the subject as found in the nursing journals, and after learning what she can as to why we should have legislation, and how it has worked in the countries where it has been tried, let her talk to others and get them interested. Our legislators have the final voice in the matter, so they must be approached personally or through their families or constituents. Leave no stone unturned that can help. It was ten years ago last November that the struggle began in the United States. To-day all but four States have legislation. In some the struggle has been hard and many compromises have been made. In others the bitterest opponents have been those who should have been the staunchest friends, but who for selfish reasons have hindered their progress.

Coming down to details, I would like to make some suggestions. As this is a matter for education, educational methods must be adopted. One of the first rules in teaching is repetition. "Line upon line, line upon line." There is a story told of the Wesleys, in which Samuel Wesley asked his wife why she told John one thing twenty times, and her reply was, "Because nineteen wouldn't do." Each nurse in Ontario, whether a member of the G. N. A. O. or not, must be told about legislation. I would suggest that the minutes of this meeting be printed verbatim and sent to each nurse. Then, with twelve numbers of the CANADIAN NURSE each year, containing something in legislation, and an occasional letter from the Executive, together with a visit from possibly the President, the nurses of Ontario ought by May, 1911, to know something of the subject. They will also see some advantage in belonging to the association, besides receiving an annual due for one dollar. I suggest that the President go on tour, as she is conversant with the latest reports from the nursing world, and being at the same time Associate Editor of the CANADIAN NURSE, can bring it before the nurses. These are not two distinct matters, but one. Without the journal our work would be even more uphill. The financial part of the work could be easily arranged between the Executive and the places visited.

Another suggestion I would make is that a committee be appointed by the Executive to obtain a list of all nurses resident in Ontario, together with one from each hospital, giving names, home addresses and dates of graduation of all nurses in training, a permanent list to be kept at headquarters and revised each year, so that all nurses can be reached. This means work for our Executive, but they are all women who have proved their interest in the past and we can put our confidence in them if we but give them some idea of how far the association will back their efforts.

Other suggestions for work are found in an article in the "American Journal of Nursing," which I beg your permission to read, as it seems most practical.

LUCY B. PELLATT.

The President—This is a very interesting paper from Mrs. Pellatt. I would like to leave it open for discussion now. I think this was the question that came up last year, and we seem to have let our interest lag a little. If there is anyone who would like to say anything on the matter I would be very pleased. Miss Rogers, have you anything to say on registration in New York State?

Miss Rogers—No, I don't think I have, Mrs. Currie; I didn't go into it very thoroughly. I don't know what I could say to you about it.

Miss Flaws—We have been having so much responsibility thrown on the Superintendents that I think we would like to throw a little back on the graduate nurses. What we found in Michigan was this, that the nurses themselves were not prepared for registration. We had to go to the Legislature three times before we got our Bill there, and it was a very good thing for the nurses, because it did away with the confusion that Mrs. Pellatt spoke of between the Nurses' Registry and the Legislature, and we found all over that the nurses didn't know as much about it as the people, and so I think it ought to begin with the nurses, and I should not think that Ontario or the Dominion of Canada should let one more day go past without making a desperate effort to get legislation.

Miss Greene—What benefits have been derived from registration in Michigan?

Miss Flaws—In Michigan we have only had it six months, and in that short time we can instinctively feel the schools are coming a little more into line, which is indicated by the requests we get for the books being used and the curriculum, which we have not had time to present to the training schools yet, because there is a good deal to do to get organized; but we have found out appalling things as far as schools registering nurses who had no Superintendent of Nurses in charge, and no Superintendent at all, and they were not even organized in the hospital they were connected with. In more than one hospital they have become organized, and they have made efforts to get Superintendents of Nurses regularly, but we have only had six months' experience so far.

The President—I think the good effect can even be seen in Canada; although we did have a little failure, I think it would have this effect in influencing smaller training schools to provide for their pupils an advanced set of study. I think a number provide work by providing post-graduate work in their hospitals for their nurses through the effort that was made by the Ontario Graduate Nurses, and I think it has been of a little assistance to us.

The Paper by Dr. Bruce on "Stovane" was read by Miss Greene and will appear in a later issue.

Mrs. Paffard—I have much pleasure in moving, seconded by Miss Crosby, that a vote of thanks be tendered to Miss Brent and Mr. John Ross Robertson for their kindness in giving us the use of this room, and also to Miss Potts, for her intereting demonstrations this afternoon.

The motion was carried with applause.

The President—The papers are now finished, and you have all the time there is left for the discussion of any subject not already taken up, or any resolution to be brought before the meeting.

THE PROFESSIONAL STANDARD.

Mrs. Paffard—Madame President, I would like to have my resolution of the afternoon seconded and approved of by the association.

The President read Mrs. Paffard's resolution, as follows: That in view of the marked decline of interest in nursing as a profession by the graduates of more recent years, this association feels that this reflects and foretells a lower professional standard, which must inevitably react, not only to the disadvantage of the training schools as such, but to the standing of the profession at large; and recommends that steps be taken by the Superintendents of training schools to more thoroughly inculcate in undergraduates the ethics of the profession and the importance to the undergraduate herself of taking an active interest in association work; and that a copy of this resolution be forwarded to the Canadian Society of Superintendents of Training Schools for Nurses.

Miss Brent—I think, Madame President, we would like to have a little discussion on that point. I would like to ask if it all falls upon the Superintendents?

THE NEW PRESIDENT SPEAKS.

The President—Before going on with this discussion I would like to ask the President-elect, Miss Crosby, to come forward.

Miss Crosby came to the platform and was greeted with applause.

Miss Crosby—Madame President and Sister Nurses: It is with a good deal of fear and trembling I undertake the work of President of this very important association. I consented very reluctantly to allow my name to stand for office, never thinking I would not be opposed in some way, and when I got the ballot paper and my name was the only one upon it, I felt like backing out at the last minute. I felt as though I was thrust upon the association, whether they wanted me or not; but I undertake the work only on the consideration that you will all do your level best to help along the work of the association during this year. Unless you support me well, then my year's work will be a failure, and I would be very, very sorry not to have a good report to present in May, 1911. I assure you I will do my best, and I hope you will all support me in that work. (Applause).

The President—We will now continue the discussion. There was a little of it that I really did not hear myself this afternoon. I would like to say a word or two on the line that Miss Brent has taken up. Having been a Superintendent myself, I know how hard a work it was to inculcate those ideas in my nurses. I know I had many failures, and I know that other Superintendents have worked just as hard, and perhaps harder than I did, and I don't know that with some of their pupils they could have made any more impression than I made possibly with some of mine. So, of course, there is that to consider. I don't think that the idea of this resolution is to lay all the blame at the door of the Superintendents. So that when this comes up, it appears to me to be a request on the part of our association to bring the matter before all the Superintendents meeting here now. That is the way I take it; I don't know whether I am correct or not. Am I, Mrs. Paffard?

Mrs. Paffard—Do you mean before the Superintendents in this association?

The President—No, just as it is here, simply to go on, although there may be some Superintendents who have not the difficulties the others have.

Mrs. Paffard—Yes; my idea in writing what I did was from the fact of hearing so much about the profession one way and another, what nurses do and what they do not do, what Superintendents do and what they do not do. I thought a paper like this might benefit the profession at large. It might urge Superintendents who have probably got a little bit slack, or have not taken as much interest as they used to do, to do better; it might help some nurses to do better in their profession. There are always some who do not know very much about the profession and what is going on outside, and I hoped the paper would give them a slight insight into that. The whole general idea was to help the profession at large, and I thought by having it brought before the Superintendents' Association more would know what our ideas on the subject were. I would like to have it freely discussed before it is seconded and passed. I would like to have it passed unanimously if possible.

The President—The question is before the association for discussion previous to its being submitted for your approval.

Miss Brent—I am quite sure Mrs. Paffard's idea is the right one. I am quite sure the Superintendents do need possibly from time to time to be reminded of what their work is. Of course we struggle along from time to time, sometimes with very good material, and sometimes with very bad. I maintain the training school should not be judged by the individual member, or by a few individual members, because, after all, teach as you will, it is

the individuality of the woman that counts every time. I have had young ladies sent to my school, and many times I have had them say to me, "I was never disciplined till I came here." I have told those young ladies that if I were in their place I would not say that, because it did not reflect a great deal of credit upon their parents. That is the material we have to deal with in a good many instances. We have the preliminary class for three months. I take those probationers myself; I do not give that class to the charge of any of my assistants, and at the end of that time some of them write me most remarkable essays on ethics. Sometimes the girl who writes the best essay has the least idea of ethics. The week before last I had my graduating class, and I think some of them felt a little small when I got through with them. Whether it will have any impression or not, I am not prepared to say. But we try at any rate to do it. I am afraid that the spirit of the age, as I said yesterday, has crept into the profession, get as much as you can and give as little as you can in return.

But, speaking for myself, and I think for the majority of the Superintendents, we are struggling from time to time. Not very long since I had a doctor come to me and say, "Altogether too much education for nurses. Last week I had a nurse on one of my cases who presumed to criticize my treatment and said something else would be very much better." I said, "Do you call that over-education?" That nurse is not even trained in the first principles of nursing. It is not over-education, it is under-education, and it is the courage of ignorance. That is not the fault of her school. Those principles are inculcated in her from the very beginning of the training, not to criticize her physician. That woman is too satisfied with herself. We can endeavour to train nurses, but some of them will not accept their training. We are making a mistake in taking such women, but we cannot always find it out during their probationary period. (Applause).

Miss Crosby—Madame President and Sister Nurses: This subject was quite fully discussed in the meeting of the Associated Alumnæ in New York. They seem to have the same difficulties there as we find. It was mentioned to-day in the Editorial Board meeting, and then it was brought up here again, and after hearing it last week and hearing it the third time repeated, I thought it was something very important, that the nurses themselves must be careful to keep the standard of their profession very high. It rests in your own hands whether that standard shall be high or low, and every nurse contributes something to the standard of nursing. You hear about some nurses who won't take this, that and the other. They do not contribute very much to the high standard of the profession. That is a difficulty which we have to deal with in some way. In New York some of the suggestions were that the members of the Alumnæ Association be asked to talk to the under-graduates, to tell them something about their difficulties in private nursing, and some of the things they might expect when they went out of the training school. This met with the approval of a very great many. The trouble is not with the Superintendents. I think that was the general feeling, that the Superintendents were doing their part, but the graduates were not doing all they might do. This was one of the ways in which they might aid the work of the Superintendents and help the Alumnæ Association and keep the standard of their profession high. At the Editorial Board meeting we had a discussion about this same problem of nurses being so very particular about where they would go and what they would do, and the hour at which they would go, and so on, and we wondered what we could do to overcome this and to get such nurses to realize that they were not ideal nurses, and we thought perhaps it would be a good idea to get the different members of the Board to send in their experiences and write them up in an editorial, and let the nurses understand just what is being done in the nursing world, and how nurses, just by a little thoughtlessness, are lowering the standard of their profession. I don't think they mean to lower the standard, but they are doing it all the same. On account of the prominence given this discussion in New York, I thought I would like to tell you about it here.

Miss Greene—I hope there are a few good nurses left.

Miss Crosby—I don't mean to insinuate that there are not.

Miss Greene—We have heard enough about the bad ones.

Miss Carr—Madame President, it seems to me that there are as many different kinds of nurses as there are kinds of people; everyone has a different nature, and I think the first essential of being a good nurse is to be a womanly woman, and the reason we hear of indifferent nurses is, I think, that as a band of women we stand or fall together, and if one nurse is found indifferent, we are all criticized and put down to that same level. (Applause).

Mrs. Downey—Madame President, as Registrar of the Central Registry, when I took up the work twelve months ago I was shocked with the conditions that existed at the time and are still existing, and I have not been able to help to remedy them very much. I don't think young nurses going out into private duty quite appreciate or understand the responsibility they have assumed in taking up the calling of a private nurse, which, of course, is quite a different thing to being in the training school with the Superintendent beside them all the time. The young nurse comes out and she gets a case, and in one case which I know of she leaves a mother and baby alone because the servant in the house does not do her work and she has got to do it. She thinks she has not got to do the servant's work and just passes out. Another thing we find coming up is that when there is scarlet fever in the house the nurse is going home to sleep, not only to her own home, but to the boarding house, not seeming to understand the responsibility that is upon her. Those are some of the diffi-

culties coming up. I think that as this has come up now, it is for us all to try to act at once. It is not much use in talking; we want to act, we want to try to remedy this evil.

The President—Miss Matheson, have you anything to say?

Miss Matheson—I think the subject has been pretty well discussed, Madame President. We try to do our best, but I don't think we are always responsible for them after they leave the school; at the same time we are always sorry to hear bad reports of them. We would be very glad to correct it, providing they would pay attention. I know there are many evils, but I don't think it is always the fault of the Superintendent.

The President—I have thought myself that it was not the idea of anyone to attach the blame to any place in particular, but to bring the subject before the association, that the association perhaps might express its disapproval of the misconduct of the delinquents in whatever case that might occur. I don't know even that we as an association, or the Superintendents individually or collectively, can actually stop these evils occurring, but we can disapprove of them, and I think it is time that we did so as an association.

Miss Brent—Do you think it possible, Madame President, that the Superintendents could correct these evils if they tried? I know I have done so. If I have had a bad report of a nurse I have telephoned to the Registrar and asked her if she has heard the report, and in one case (I think Mrs. Downey will bear me out) I sent for the nurse and reported her. People are very willing to talk about things, but they won't make any specific charge; they will grumble and growl. If you were to pin them down, did Miss So-and-So do such and such a thing, or did she not? the answer you get is, Oh, I wouldn't like to make those assertions, you know. But they talk. (Applause). You remember, Mrs. Downey, I spoke to you about that, and I will do it every time I hear about it.

Mrs. Downey—Yes, Miss Brent always reports every nurse she hears about, and I bring it before the Committee and the Committee acts on it. The doctors complain continually. I had it even yesterday. I say to the doctors, "Make your complaint in writing and send it in." They say, "I don't like to do it," and nothing is done. I suppose they do not like to make the complaint, but there is not a day goes past but a doctor is complaining about a nurse some way or other, either that she does not do this, or does not do that, and I have given up speaking to the nurses over the telephone. I generally ask them to come and see me, and I try to do all I can for them. It is particularly with the young nurses that the trouble is found.

Miss Brent—I can quite sympathize with Mrs. Downey about the doctors making complaint. They do the same thing with the house surgeons; they come and tell me this, that and the other thing, but they won't go to the house surgeons.

Mrs. Downey—The Central Registry now is a very important organization; we are very popular, not only in Toronto, but all over Ontario, and in fact in the United States to a great extent. We are getting letters every day from different points, such as New York, Chicago and Winnipeg, and the nurses are sent from the Central Registry to those distant points. The only way to remedy the difficulty I think will be for the Central Registry to keep the standard high. We are trying to make it higher every day. We have to have the rules very strict and adhere to them. A copy of our Constitution goes to every nurse, and they know the rules, but I think they will perhaps have to be more strictly adhered to than have been in the past.

A Delegate—Sometimes reports come to possibly Mrs. Downey or to the doctor or the Superintendent; they come from a patient who is not suited, and unless there has been some real error, it is a heart ache to a nurse to have to leave a case leaving people, so to speak, with a bad taste in the mouth; it makes the nurse feel badly to have it reported at headquarters. If the doctor does not say it to us, he possibly talks it over with the family, and the family talk it over with their friends, and we don't know it until we get it second-handed.

The President—Is Miss Morton present? Perhaps she would speak to us.

Miss Morton—Madame President, I have not found as much difficulty with the nurses trained in the earlier years as I have with those coming out now; they seem to have hard hearts; the older nurses seemed to give greater satisfaction, for some reason or other, and they are not so particular as to the kind of case they will take as the more recent ones have been.

Miss Bowling—So far as our association is concerned, I have found that it is difficult to get that type of a girl to join our association. The nurses who are busy in their work find it difficult to get at the girls who have complaints sent in about them, when they will not join our association. The majority of those who join the association are girls, who do not have as many complaints sent in about them, that is, those that the Alumnæ hears about. We have been trying our best to get all the girls into the association, but we cannot bring our influence to bear on them if they will not join the association.

Mrs. Pellatt—The complaints generally come with reference to recent graduates, that the Alumnæ Association has not had a chance to get after, and as the Superintendent has had charge of them for two or three years, the Superintendent gets the blame. Would it not be a good thing to follow out the suggestion made yesterday, to have the Superintendent co-operate with the Alumnæ Association, or the Alumnæ Association help the Superintendent in the training school to give short talks on private nursing?

Miss Mackenzie—May I ask Mrs. Downey what is to be done with these nurses that the complaints come in about? Are they to be put off the Registry, or is just one complaint to be taken as a criterion of the work they have been doing?

Mrs. Downey—The rule of the Registry is, according to our Constitution, that on three complaints they are put off the Registry. The third complaint has not come in, it is generally the first and second, but sometimes the complaints are such that I think the first complaint should be sufficient.

Miss Mackenzie—What has been said might be true if there were actual mistakes in nursing, but, as I said before, it is the personality of the nurse that is complained of. Would even half a dozen complaints of that nature constitute a good reason for her being put off the Registry?

Mrs. Downey—I don't think the Committee things it is a question of personality at all; but the question is this, a young nurse goes to a case, and there is a maid in the house, for instance, and the nurse does not think the maid is doing her duty, and she does not see why she should do all the work, so she leaves the case; the mother and baby are there, waiting without any nurse; she has left the case. There has been a nurse in the case before, several months ago, and the former nurse did everything. I don't know whether they had a servant at the time or not. Then another case which I mentioned was where a young nurse, in a scarlet fever case, went home to sleep.

Miss Mackenzie—The maid is pretty hard to put up with sometimes. I heard of a case where the nurse went on and two of the maids left, and the doctor said he couldn't employ that nurse, he would have to get some person else. I knew of another case, and these were friends of mine, where the maid left; she wouldn't get the nurse's meals for her, so the nurse either had to leave or get her own meals.

Mrs. Downey—The great difficulty is that so many are going into the hospitals. In my opinion we as nurses do not go simply to nurse the family, we go to relieve the family. That is what I call a nurse's duty, and I don't consider that any nurse finds anything demeaning in her profession, no matter whether she has to wash the dishes or do some work in the kitchen.

Miss Mackenzie—I am not speaking of this from a personal standpoint, but simply in connection with this discussion. Supposing you go into a house and you are going to be a nurse on a case, and the maid is as disagreeable with you as she can be, and the whole house is upset, and that is repeated to friends, and you hear it talked about as far as you can go? Do you think that is a complaint that should be considered and that should be taken as an indication that our nurses are going back in their profession?

Mrs. Downey—Perhaps not, but, as Miss Brent has said, you cannot instill certain things into some nurses. The first thing to do in going to a case is to let the nurse get to be friends with the maid; never ask a maid to wait on you, and before you leave the case the maid will do everything you want.

Miss Mackenzie—I know of a case in a family where there have been operations, and where the whole family were furious because the nurse turned the sitting room out to make it into an operating room. Of course that is not a case where the nurse ought to be found fault with.

Mrs. Downey—I think it is altogether a question of character. I don't want to speak personally, but you go into a house, especially where there is an old lady, and we ought all to show respect to age, that is the first thing we are taught in our homes, and the grandmother comes along and says, Mrs. Downey, or Miss Smith, that poultice isn't put on right, just put it on this way; I know how to put on poultices. Put them on her way, and when she passes out, then put the poultices on to suit yourself, and everything is all right.

Miss Mackenzie—The probability is the patient will tell her that the nurse changed it. (Laughter).

Miss Crosby—I think the Chairman of the Registry Committee is not here, and as I was Chairman of that Committee for a good while, I would like to say a word or two on this discussion. Any minor complaint that came into the Registry Committee, finding fault with a nurse, was always thoroughly investigated by the Committee, and the nurse was given the privilege of either stating her side in writing, or appearing before the Committee and vindicating her conduct. A nurse was never censured by the Committee without the privilege of being heard, and any little complaints that really arose out of such instances as have been mentioned by the last speaker were considered, not misdemeanors on the part of the nurse at all, but just little frictions that under the circumstances could not be avoided, and for which the nurse professionally could not be blamed. I think probably that explains the position taken by the Registry Committee.

Mrs. Paffard—I think the discussion has been rather far afield from my resolution, and I would like to move now that it be adopted.

Miss Crosby—I have very much pleasure in seconding Mrs. Paffard's resolution.

The President put the motion, which, on a vote having been taken, was declared carried.

The President—It was agreed yesterday at the Superintendents' meeting that cablegrams should be sent to Her Majesty the Queen Mother, expressing our sympathy, and also to Miss Florence Nightingale, congratulating her upon attaining her 90th birthday, and we as an

association joined with them in sending those messages. I believe they have been sent, and it is simply to make the statement, so that you will know what has been done.

Miss Brent—Mr. Robertson is to see that these messages are sent to-morrow. I believe there is some form to be gone through, that the cablegrams will have to be sent through His Excellency the Governor-General. I am not perfectly certain as to the proceedure, but Mr. Robertson said he would kindly look after it for us and send those cables to-morrow. I am to call him up early in the morning, and he will tell me exactly how it was to be carried out. The cable of sympathy and the cable of congratulation will be sent by him as representing the Canadian Society and the Ontario Graduate Nurses.

The meeting to-morrow morning is to be at half-past nine, in order that we may get through in time for the meeting of the Army Nursing Reserve, which is to be held here at 11 o'clock. His Honour the Lieutenant-Governor will take the chair, and Col. Jones, I think, will speak. I would also like to tell you that the room at the end of the corridor contains quite a valuable collection of hospital and training school literature, which you are all invited to inspect.

Mrs. Paffard—A great many of us have missed yesterday and to-day one of our first Presidents of the association, who has been ill. She was the main organizer in our efforts to have the Bill passed for legislation, and I would like to have a letter sent to her, expressing our regret that she was not able to be present at the meetings, and hoping she will be quite well again soon. I refer to Miss Eastwood, of the Victorian Order of Nurses. (Applause).

Miss Brent—I have much pleasure in seconding that motion.

The President put the motion, which, on a vote having been taken, was declared carried.

At 9.45 p.m. the meeting closed.

CONVENTION NOTES.

A most delightful reception was held at the home of Mrs. C. J. Currie, President of the G. N. A. O., on Monday evening, May 23rd, when Mrs. Currie entertained the members of the Canadian Association of Superintendents of Training Schools for Nurses and of the G. N. A. O. A most enjoyable and happy evening was spent by the nurses, who thoroughly appreciated this opportunity of becoming better acquainted with one another. Mrs. Mill Pellatt and Miss Mathieson were in charge of the tables, which were very artistic with decorations of beautiful Richmond roses.

Miss Brent, President of the Canadian Association of Superintendents of Training Schools for Nurses, entertained the officers and members of that association and the officers of the G. N. A. O. at luncheon in the beautiful dining room of the Residence, Hospital for Sick Children. The function was a most enjoyable one. The kindness and genial hospitality of the gracious hostess will not soon be forgotten by those present.

Anyone wishing to visit New York will find the Sesrun Club a most desirable place for headquarters. Its situation in a beautiful part of the city, convenient to surface cars and to elevated or subway trains, and its efficient management, which provides every comfort for the guest, strongly recommend this club to anyone visiting New York.

Annual Meeting of Toronto Central Registry.

The Fourth Annual Meeting of the Central Registry of Graduate Nurses, Toronto, was held at "The Brown Betty," 42 King St. East, Toronto, on Wednesday, June 1st.

The splendid work done during the year and the satisfactory condition of the Registry funds is shown in the following reports:—

THE SECRETARY'S REPORT.

Friends and Sister Nurses:

Five years ago to-day the Toronto Central Registry of Graduate Nurses was started, under the splendid management of Miss Barwick, our first Registrar, and it is to her that the success of the Registry is due.

We then had for the first two months six nurses on the list; to-day we have three hundred and fifty active members. Since May 1st, 1909, Mrs. Downey and her sister, Miss Millar, have carried on the work begun, and I feel confident they have put forth every effort to carry it on faithfully and successfully. The work was new to them, and the members, numbering between two or three hundred, most of them strangers, to say nothing of the Doctors and the public, which made it no easy task.

As you all know, the Central Registry in the beginning was organized by the Alumnæ Associations of the Toronto hospitals, two representatives from each Alumnæ constituting the Registry Committee. Later it was thought unfair for the outside nurses to have no representative, while at the same time constituting a large portion of the membership of the Registry. They were then granted two representatives, these members being appointed by the Social Club, and later by the Toronto Graduate Nurses' Club. As neither of these organizations fully represented the outside nurses, the "Florence Nightingale" Association of Nurses was formed during the past few months, to take the place of the Alumnæ Association of the hospitals from which they graduated.

There have been complaints received of nurses overcharging. The committee feel very badly that such things occur and would ask the members kindly to adhere to the rules and so aid them and the Registrar in their work.

Sickness is ever an unwelcome guest, to rich and poor alike, but when it comes hand in hand with poverty or limited means, and brings in its train a long list of expenses, no true nurse or woman would condescend to strain these limited resources for her own gain. To quote a few lines from Miss Barwick's report of last year, "If each member is truly loyal to her Registrar, has faith in her, and tries thoughtfully to obey the few rules of the association, then her work will be lightened a thousandfold."

There have been many criticisms of the Registry ever since it was started, as there have been of everything since the beginning of the world. (It is so easy to criticize!) But the rule has been made that no complaint shall be received, whether of nurse or Registrar, which is not made in writing. In which case it is duly considered by the committee and action taken. In the case of a complaint against any nurse, she has the right to appear before the committee to defend herself, or if she so prefers, to be defended by her representative from her Alumnæ or the "Florence Nightingale Association."

In future, any nurse wishing to join the Central Registry must first be a member of her own Alumnæ.

Before closing I would like, on behalf of the Convener, to thank the members of the Central Registry Committee for their faithfulness in their attendance at the monthly meetings. To me it has been a pleasure and an education to meet them and hear them discuss the different problems that have come up. I would ask all the nurses to assist in making this year a most successful one for the Registry by being true and loyal members, as well as true and loyal nurses to the profession. Let us aim high, and, in the words of John G. Whittier,

If there be some weaker one,
Give me strength to help him on;
Make my mortal dreams come true
With the work I fain would do;
Clothe with life the weak intent,
Let me be the thing I meant;
Let me find in my employ
Work that dearer is than joy;
Out of self to love be led,
And to heaven acclemated,
Until all things sweet and good
Screen my nature's habitude.

M. L. BARNARD, Secretary.

THE REGISTRAR'S REPORT.

Madame President and Members of the Toronto Central Registry for Graduate Nurses:

I have pleasure in presenting to-night my first Annual Report as Registrar. Since our last meeting together the Registry has passed through another year of life, and becomes a year older in experience. It has also grown in numbers and in work.

We commenced the year with a change of administration, which is always trying, but I am glad to say hearty interest and support was accorded to me from many quarters, and I hope my report to-night will show you that the twelve months have been ones of advancement. The books closed last year with a membership of 288, and this year ends with 350. Many names had to be struck off the list the first few weeks of the year, notices of withdrawal not having been sent in. This loss has been more than made up by the addition of 100 new members, bringing the roll to-night up to 350, distributed as follows: Toronto General Hospital, 111; Sick Children's Hospital, 36; Grace Hospital, 42; St. Michael's Hospital, 35; Isolation Hospital, 22; Western Hospital, 12; St. John's Hospital, 4; Orthopœdic Hospital, 2; Nursing Mission, 2; Dr. Meyer's Hospital, 4; English and Canadian, 38; American, 42.

The calls for the year totalled 1,814, showing an increase of 145 for the year; of this number 437 were personal and 1,374 were Registry.

The largest number came in March, wit ha total of 208, and the lowest in July, with 96.

The finances for the year also shows an increase in income and expenditure.

The statement is as follows:—

ANNUAL CASH STATEMENT, JUNE 1, 1909, TO MAY 31, 1910.

RECEIPTS.			EXPENDITURES.		
Balance June 1, 1909—			Bal., Miss Barwick, outstanding..		$4 50
Savings Account.....	$751 54		Salaries		1,035 00
Current Account.....	81 48		Telephone and Telegraphs.....		80 37
Bal. on hand last year	15 00		Stationery	$86 76	
		$848 02	Postage	32 65	
Fees received for the year.....		1,737 90			119 41
Charts sold for the year.....		12 75	Advertising		31 16
Interest on Savings Account.....		20 05	Annual Meeting, 1909—		
			Brown Betty	$35 00	
			Musicians	8 00	
					43 00
			Mrs. Pellatt, for Extravaganza...		14 00
			Charity Cases		7 00
			Balance, Savings Account.	$771 59	
			Current Account	512 69	
					1,284 28
		$2,618 72			$2,618 72

Audited and found correct:

H. SHEPPARD.

The fee for membership has remained as usual, namely, five dollars per year, but to facilitate the bookkeeping, which is a heavy and responsibe part of the Registry work, it has been found advisable to make all accounts run concurrently. The year has therefore been divided into two parts, and bills now date from the first of January and the first of July, and are sent out in accordance with this arrangement.

A large amount of printing has been done. With a view of keeping the Registry before the medical profession, a small card was printed, setting forth the number of the telephone in sharp, clear type, and of a size to conveniently hang over the telephone; four hundred of these were mailed to the profession in and around Toronto.

The Constitution was reprinted, our committee feeling it advisable to make a slight change in Article X., and the fees for obstetrical cases have been increased from $18 to $21 a week.

The small book containing the names of every member of the Registry was also reprinted and distributed. In fact, a large amount of matter has been sent to both laity and profession this year.

During the winter the prevalence of typhoid fever throughout the Province brought many calls for nurses. A large number were sent to Cobalt and several to the Montreal Emergency Hospital. Bright, chatty letters came to me from our workers in these places. Montreal, so renowned for its generosity and hospitality, provided pleasure and comfort for our members when off duty; and Cobalt did all it could to brighten their labours in that new field. The nurses were taken down into the mines and nuggets of silver presented to them as souvenirs.

A call from Gowganda for a case of typhoid caused us some anxiety and excitement. On receipt of a telegram a nurse was sent forward at once, but wired from Cobalt that two

days' travel by canoe and portage alone with men through a wild country lay between her and Gowganda. To push forward under such conditions and at that season of the year (it was 21st October) could not be thought of, and we had reluctantly to order her to abandon the journey. It was distressing to fail the Doctor in that distant point of call, but the Registry's first duty is to its nurses who place themselves under its care, and I am glad to say the Doctor wrote me later he had secured help nearer home, and our nurse found herself welcome in Cobalt, where typhoid was still claiming daily victims.

This Gowganda call taught us a lesson in geography by telegraph, which I think can rank in importance with tuition by mail and dressmaking by wireless, which latter achievement it would appear is the latest modern device for the benefit of the wealthy on some New York steamers.

A new departure in a nurse's life has just been opened up by the appointment of representatives of our calling to work in the Public Schools. Two of our members, Miss Robertson and Miss Jamieson, both of the Sick Children's Hospital, have secured the coveted positions, and from the reputation they have won in private work I think there is no doubt of their success.

A Nurse's Army Reserve Corps has also been formed under the patronage of His Excellency Earl Grey, and the Dominion Government has arranged to appoint several nurses (I am not sure how many) to go into camp this year with the militia at Niagara. I have no doubt the fortunate ones will be much envied.

Our outside graduates have formed an interesting association among themselves called the Florence Nightingale Association. It is for all nurses of hospitals other than those in Toronto, and it is expected that these nurses will avail themselves of the advantages of this association. Helpful ideas and plans are evolved by meeting together, and associations such as these act as a constant incentive to advancement.

I regret to say illness has not spared our members, but am happy to report none have been taken from us. Calls also of many kinds have come in throughout the year, but the latest reports would indicate that many June brides will rob the Registry of some of its most popular workers.

I would like to say a few words here of our work as an organization. As the Registrar told you last year, we all have a share of this burden to bear. All our loyalty and strength is needed for our upbuilding, and if we would keep alive we must keep active. Active in the interests of the Registry. Keep it before the medical profession. Make it clear to them it is the main channel by which you will be found. Work for it as your chief source of work, and not as a last resort for a call.

If each of our 350 members would resolve to have all her calls come through the Registry, such a volume of work would pour in that no nurse would find herself waiting on the lists for weeks at a time, as she does to-day. Surely on no work does the motto "United we Stand" apply with greater force than in ours. If Doctors are torn between requests for personal calls as well as for Registry ones, the ending of the motto can be the only result, "Divided we Fall." Let us work for the former and we need not fear the latter.

I thank you all for your kind assistance during the year, and to the members of my committee I am especially indebted for support and advice. The meetings have been well attended, and keen interest shown in all Registry affairs, and I appreciate the wisdom that prompted their remaining in office another year. It brought to myself the help I so greatly needed and was of inestimable value to the well-being of the work.

This brings my report to a close. It has been a full and strenuous year. We have now entered upon a new year of work under a new Sovereign. Our nation is mourning the loss of its dearly beloved King Edward VII., who has been taken so suddenly from us. During his noble reign our Registry has been built up under particularly happy conditions of peace and prosperity. I am sure we all hope we may continue to enjoy these advantages under our new King, and that a bright future is before the Toronto Central Registry for Graduate Nurses.

AMY S. DOWNEY, Registrar.

Report of the Annual Meeting of the American Society of Superintendents of Training Schools for Nurses.

The American Society of Superintendents of Training Schools for Nurses met at the Academy of Medicine, New York, May 16th and 17th, 1910. The large gathering was called to order by the President, Miss Nutting, who called upon the Rev. Henry Lubeck for the invocation.

President Finley, of the College of the City of New York, gave the address of welcome, in which he not only graciously welcomed the Convention to his city, but gave food for thought in his classification of the bacteria that attack the mind, and against which the nurse must contend, as well as against those which attack the body: 1, Bacteria Parisiticus (the world owes me a living); 2, Spirrhœa Metida (time-killers); 3, Micrococus Egotisticus, the last and greatest infirmity, for those attacked with this germ only seek to raise themselves. He said: "Those you send into the field have to contend not only with the bacteria that attack the body, but with those that attack the mind. They must minister to the souls as well as the bodies. Therefore they must be well equipped in every way. The nurse must ever show a readiness to forget self and a willingness to be forgotten."

This masterly address of welcome was replied to in an apt and fitting manner by Miss Nevins, Washington.

Miss Nutting, in her Presidential address, paid a high tribute to the work and merit of the late Mrs. Robb. She emphasized the necessity for the training schools maintaining a high standard, both educationally and in professional skill. Criticism, she said, spurs us on to better things. The best is always yet to be.

Miss McIsaac was called upon to speak of the life and work of the late Mrs. Isabel Hampton Robb, which she did in a very fitting manner. She spoke of the charming personality, the far-seeing brain, and the warm heart of the dear departed, and the firm stand she ever took for the higher education of the nurse.

It is impossible to report in detail all the very excellent papers which were read at these meetings, but if we may judge from the general trend of the papers and the discussions following, the nurses who are trained under these Superintendents are to be congratulated. Higher standards and greater professional efficiency will surely be the result.

The necessity of fitting the nurse-in-training for filling the many positions which were opening up for her was carefully considered. The need, too, of the nurse having, not only a good general training, but also some training (three to six months) in special branches, as nursing in diseases of eye and ear, obstetrics, and tuberculosis, was strongly emphasized. Affiliation of special hospitals with General Hospitals was suggested as a means of securing this training.

"Student Government in Colleges" was carefully explained in an able paper by Miss Julia Stimson, Superintendent of Nurses, Harlem Hospital. The general opinion seemed to be that the introduction of the principles of student government into training schools would be productive of much good.

Dr. McMurry, Teachers' College, Columbia University, gave a most interesting address on "The Relation and Proportion of Theory to Practice in Vocational Training." He emphasized the need of a teacher (the nurse is a teacher) being rich in ideas as a means of happiness, resourcefulness and skill. He thought a student's time should be equally divided between theory and practice. He was rather shocked when told that the pupil nurse had sixty hours practice to two hours of theory. "Can you master a field of thought merely by practice? Breadth and degree of skill are dependent upon fulness of knowledge."

A joint meeting of this Association and The Nurses' Associated Alumnæ of the United States was held in the Horace Mann Auditorium of Teachers' College on Wednesday afternoon.

James E. Russell, LL.D., Dean of Teachers' College, welcomed this large and representative gathering of nurses to the beautiful college hall.

The afternoon was devoted to the discussion of occupations for invalids, their variety and therapeutic value. Professor Dow spoke of the value of art in this field and showed some examples of what had been accomplished. An exhibition of work done by invalids was viewed with very great interest at the close of the meeting. A most enjoyable social hour was spent over a cup of tea when the members of both associations were the guests of the college.

Wednesday evening, May 18th, 1910, will not soon be forgotten by those who had the privilege, in Carnegie Hall, of taking part in the exercises in commemoration of the fiftieth anniversary of the founding by Florence Nightingale of the first training school for nurses. Twenty-three thousand people gathered there to do honour to this noble woman, who has lived to see such great results from the work inaugurated by her fifty years ago.

Hon. Joseph H. Choate, in his address on "What Florence Nightingale did for Mankind," characterized her as "one of the great heroines of the race." After giving an

account of her training and her work in the Crimea and in organization afterwards, he traced the progress of the profession, noting the many fields now occupied by the nurse. "Did Florence Nightingale's prophetic vision behold all this fifty years ago? At any rate, few people have been blessed as she in living to behold the spreading branches of the oak she planted half a century in the past, and of hearing from a noble profession, by the cablegram sent her, that it cherishes her imperishable name and example as a guiding star in the profession."

The Nurses' Associated Alumnæ of the United States, at its afternoon session in Mendelssohn Hall, May 19th, considered the subject of private duty nursing. The great educative work possible for the private duty nurse was emphasized. She can teach health and hygiene and do much, very much, in the prevention of disease.

She has need of tact, forethought, persistence, spiritual training as well as technical training, and high moral and ethical standards. "She has a narrow road in which to walk. Yes, but so is the road to heaven narrow." Exchange of ideas in the journal is an important means of help and should not be forgotten.

A strong appeal was made for nurses to engage in missionary work, by Miss Tomlinson, missionary nurse, home from China on furlough, and by Dr. Zwemer, Secretary of the Student Volunteer Movement. Dr. Zwemer, who has worked in Arabia, said that fifty nurses could be placed annually in the foreign field, if only they were available.

The Friday morning session was devoted to the consideration of nursing in special branches. All nurses were advised to keep in touch with the advance and development of the profession in other lands as well as in our own, by carefully reading the nursing journals.

In the consideration of district nursing, it was found a marked development had taken place. At first the sick poor were the only care, now the district nurse is a power in the prevention of disease, and in bringing about needed reforms she can collect facts and so present them that they cannot be ignored.

Tuberculosis nursing was discussed at some length. It was felt that if the nurse had better training in this branch of work and greater knowledge of the disease, there would be less difficulty in getting her to engage in this very important work.

In considering the work of nursing the insane, the conviction seemed to be strong that this valuable branch would soon form part of the general curriculum.

Miss Dock said that "Social and preventive work was to be the keynote of the Congress in Cologne in 1912."

Miss Hay, Chicago, gave an able paper on "Ethics," which was listened to with marked attention. No set of rules, she said, will ever make people ethical, but we need some thoughtful consideration of our laws for the proper development of character. Qualities of heart must be taught and demanded, as well as qualities of intellect, magnanimity, forbearance, and unremitting helpfulness must ever characterize the woman who would be a true nurse. Do not mar your usefulness by selfish consideration. We must always be guided by the command, "Thou shalt love thy neighbor as thyself."

These very helpful and enthusiastic meetings were brought to a close after the decision to meet in Boston next year was reached.

The nurses and superintendents of New York had made every provision for the entertainment of their visitors, that the hours between sessions might be both pleasant and profitable.

Opportunities were given to visit the hospitals, the Nurses' Settlement and the Central Club House. Many took advantage of these and much appreciated the kindness of those in charge, who did everything possible to help the visitor in her search for new ideas.

The very great kindness of Mrs. Havemeyer in entertaining the nurses and giving them the privilege of viewing her very fine art collection was much appreciated.

The harbor trip, which came after the strenuous work of the Convention was over, was most delightful and was thoroughly enjoyed by all. It afforded a splendid opportunity for exchange of ideas on the work that had been done during the Convention.

A most enjoyable social hour was spent with Miss Goodrich and her staff in their beautiful Nurses' Home at the close of this trip.

Organization of the Army Nursing Reserve for Canada.

Report of proceedings at the meeting of the Army Nursing Reserve, held at the Residence, Sick Children's Hospital, Toronto, on Wednesday, May 25th, 1910, the chair being taken by Hon. J. M. Gibson, Lieutenant-Governor of Ontario.

11 o'clock a.m.

Hon. J. M. Gibson—Ladies and Gentlemen: I have been honoured by an invitation to preside at this meeting, and I am really very much pleased indeed to see so goodly a number present, undoubtedly signifying by your presence that you take an interest in what is about to be proposed.

Her Royal Highness, the Princess Christian, is the leading spirit, the head of an order called The Army Reserve of Trained Nurses in England. Her Royal Highness has devoted a great deal of attention to the organization of this body, and anyone can well understand that no more praiseworthy work could be engaged in by one of her prominence and well-known public spirit than a movement of this nature.

We can all understand, although probably few of us actually appreciate, the want of this branch of service in actual war times. We have read of harrowing incidents connected with campaigns, we have heard and read of the wounded lying neglected, unattended to and dying in agonies without receiving proper attention.

Now, I take it that the object of this movement is that there shall be organized in Canada an Army Reserve of Trained Nurses, who, when the time comes, will devote themselves to the service of their country in making available to the military units, the army such as we may have on the field, their services for attention to the sick and wounded, under a military direction and where their services will be most valuable and useful. I have now much pleasure in introducing Col. Jones. (Applause).

Col. Jones—Your Honour, Ladies and Gentlemen: It is indeed a very great pleasure for me to be here to-day. In the first place, I must express the very great regret of His Excellency at not being able to attend this meeting, and to read a letter from the Secretary, in which he says:

"His Excellency having cancelled all his engagements owing to the death of His Majesty King Edward VII., he therefore will not be in Toronto on May 25th as he had intended. His Excellency desires me to inform you, therefore, that he regrets he will not be able to attend the meeting of the Canadian Association of Nurses on the 25th May. He wishes the meeting every success."

Now, Sir, in coming to the subject of the aid which the nursing profession can give the army and the country in time of war, we, of course, must recognize the fact that war is inevitable at some time in the history of this country, and we must also remember that the sufferings entailed by war are unavoidable. It is therefore our bounden duty to mitigate these sufferings in the best and most comprehensive manner possible. In Canada, fortunately, war has never been experienced in all its horrible details. It is difficult to make people realize what war actually is, how the whole country is affected by it—each individual member—not only those at the front, but everybody, those who remain at home, no matter what their calling or their capacity may be.

Now, in order to try and mitigate these sufferings we must have an efficient medical service. We are trying to have that at the present time. But we might plan hospitals, we might issue supplies, we might obtain medical men, but even if all these different branches were complete, and we had no nurses, our whole system would fall to the ground.

The importance, the necessity of nurses in the field, was demonstrated as long ago as the Crimean War. The demonstrator is still living, the most honoured woman that has ever existed almost in our broad Empire—Florence Nightingale. (Applause). To think that it is over 50 years since she demonstrated the actual need of an efficient nursing service! While there is an efficient nursing service in the army and to some extent in the militia of Canada, we have nothing to supplement that service in case of necessity.

Now, all wars bring reforms and all wars bring changes. Our latest war, the South African War, was particularly hard on the medical service and particularly hard on the nursing profession. As a result of this—not on account of the shortcomings or the failures of the nursing profession, but on account of its limitations—a number of reforms took place in the British Army. One of these was, through the great helpfulness of Queen Alexandra, formed and named the Queen Alexandra Nursing Service, and as an addition to this was formed the Army Nursing Reserve. This Army Reserve is very simple. It is simply a certain number of civilian nurses who enter into an agreement with the Committee of the Army Nursing Reserve, to give their services to supplement the regular service in case of war or necessity. Now it has extended to various parts of the British Empire—in South Africa and in Australia particularly—and the question now is whether you here to-day will cause it to extend to the Dominion of Canada as well.

We have in Canada at the present time, in the Canadian Militia, a nursing service, both in the permanent and active militia. This nursing service is small, and is more designed to meet the actual requirements of militia during training than in case of war. It is, of course, capable of expansion, but it would have to work in with the Imperial service in the same way as our militia, on the principle of working in connection with the Imperial system. For the first time in the history of the Canadian service, nurses will this year go into camp. Nurses are going to Niagara Camp this year with No. 2 Hospital. They will have their first experience under canvas. We have formed two general hospitals in skeleton camps, one in Halifax and one in Toronto. The establishment of these calls for six nursing sisters. Next year we hope for more, so that we will have a nucleus—small, it is true, but very capable. At the present time we have a class of nurses undergoing military training in the Military Hospital at Halifax. This is held every year during the month of May.

This movement is not new in Canada. About three years ago Her Royal Highness the Princess Christian wrote to the Governor-General, asking him if it would be possible to form a branch of the Army Nursing Reserve in this country. I was instructed by him to bring this matter before the nursing profession, which I did. As a result one of the associations, the Society of Superintendents, volunteered in a body. This was patriotic but not practical, and it was found that it would be necessary to have a separate organization, that there would have to be a definite branch in Canada and that branch would have to be organized by having its officers and committee. It is absolutely necessary that we should have organization. This committee would manage the affairs of the branch in Canada. It would receive the applications of candidates and report on them to the home branch before they received their certificate, which is sent by the Princess Christian, enrolling them in the Reserve. There are many details which would have to be considered by this committee; for instance, the limitations for the expansion of service. In England the nurses who enter the Army Reserve undertake to serve only in the United Kingdom, but they can if they wish volunteer for service aboard in time of war. The question as to whether the obligation which the nurses of Canada would take upon themselves would be limited to serving only in Canada or in other parts of the Empire would be a question for the nurses themselves to decide.

There are various other details which are minor in character and which it is not necessary for us to go into at the present time. I have here the Constitution of the branch in South Africa, which would be a guide to us in forming any branch in Canada; but the question which I would ask you now is, Will this movement receive the endorsation of the nursing profession in Canada? Will the nursing profession in Canada demonstrate to the Princess Christian, the committee at home, and the nurses generally throughout the Empire, that they are ready to take upon themselves the honour and the burden to serve their King and country? The very fundamental principle of the nursing service is self-sacrifice, and there can be no higher self-sacrifice than the self-sacrifice which anybody, who voluntarily gives her service, will render to her King, Canada and the Empire. (Continued applause).

Hon. J. M. Gibson—I am going to take the liberty of asking Miss Snively to lead off. (Applause).

Miss Snively—If it is in order, perhaps we can attain the object that we desire this morning by a resolution. I would, therefore, move that this meeting of representatives of the combined associations of trained nurses do hereby resolve that there be formed and organized the Canadian Branch of the Army Nursing Reserve.

Miss Brent—I have much pleasure in seconding that. Carried unanimously.

Hon. J. M. Gibson—I would suggest now that a small provisional committee be appointed for the purpose of taking steps to give practical effect to this motion which you have adopted.

Moved by Miss Stanley, of London, seconded by Miss Rogers, of Toronto, that the following be appointed a provisional committee for the purpose of preparing and adopting a working scheme, with the object of giving effect to the foregoing resolution, namely: Mrs. Cotton, wife of General Cotton, Commanding Western Ontario; Miss Mackenzie, Superintendent of the Victorian Order of Nurses; Miss Snively, President of the Canadian Association of Trained Nurses; Miss Brent, President of the Superintendents of Training Schools for Nurses; Miss Crosby, President of the Ontario Association of Graduate Nurses, and the President of the Quebec Association of Trained Nurses. Carried unanimously.

It was decided that a meeting of the committee just formed should be held at the close of the meeting.

Mrs. Cotton—May I suggest that His Excellency Lord Grey be asked to be Patron of this association?

Hon. J. M. Gibson—I think a resolution to that effect is a very nice and very pleasant thought.

Moved by Mrs. Cotton, seconded by Miss Snively, that His Excellency the Governor-General of Canada be respectfully asked to honour this association by consenting to become Patron therefor. (Applause). Carried unanimously.

Col. Fotheringham, Lieut. Scheck and Major Marlow were also present.

After the usual votes of thanks had been passed the meeting adjourned.

ON ACTIVE SERVICE.

By A. N. S. R.

Wynberg[1] again! After a passage of eighteen days from Southampton to Table Bay, a passage of glorious weather, with the exception of the first thirty-six hours, down the English Channel and across the "bay," leaving behind us the dark December skies of Old England, the bleak days, and steaming every hour into sunshine and warmth. We touched at Madeira, that sunny land, where it is "always afternoon," ate custard apples and other wonderful fruits in the stone-paved market place; made the usual royal progress in the quaint, bullock-drawn, canopied sleighs, with our retinue of guide, diver and "greaser"[2]. Then long, sunny days, the sea blue as sapphire and smooth as glass, the monotony broken by schools of dolphins gamboling alongside the ship, or in the distance shoals of flying fish, their "wings" gleaming white against the sapphire of the sea. A voyage across the South Atlantic in calm weather is the very apothesis of idleness. Occasionally some energetic people would get up a game of shuffleboard, and there were the usual few who solemnly walked their allotted number of miles, round and round the decks, before breakfast; but a deck chair, a little desultory chat, and reading, gave most of us all we wanted to do. The lovely evenings after dinner, which even in the tropics were comparatively cool; the Southern Cross shimmering gold in a purple sky; or perhaps bright moonlight turning the wake of the ship into a snow-white path; and then at last the indigo waters of Table Bay, its huge green rollers, seriously interfering with the internal comforts of some of us; the big, square-topped, majestic Table Mountain, with its "cloth" of white, fleecy cloud hovering over it, its pine-clad, olive green slopes, and nestling at its foot Cape Town and its beautiful suburbs, of which Wynberg is one of the most beautiful. Barely two months since leaving it for duty on a hospital ship, and a short furlough in England after a year's service in the Transvaal, and now here again waiting for orders. For what part of the field am I destined this time? Just time to unpack and look over my things, and on the third morning in comes the Superintendent.

"Here are your orders from headquarters, to proceed at once per hospital train to Pietersburg, en route for Clausfontein."

Clausfontein, we find, is a small Dutch town about two hundred miles from the railway. How we are to get over that 200 miles we leave for the future to decide. In a little more than an hour Sister M. (who has the same orders) and myself are aboard the Princess Christian Hospital train, the guests, pro tem, of the medical officers and army sisters in charge of same. What a blessing these trains have been through the war, bringing down the sick and wounded, lying comfortably in cots, arranged like ship's bunks, in tiers on each side of the long coaches, carrying from 200 to 300 men at a time. "Our" train is empty, returning to the front for a fresh load. For about eight hours we travel with the hospital staff, through the verdant, beautiful Cape country, gradually changing into the wild, desolate, yet fascinating veldt, through which we are to "trek" to our destination. Here is Pietersburg, 7 p.m. the daylight disappearing with tropical suddenness, and we are left on the platform with our baggage around us, gazing somewhat disconsolately after the friendly hospital train. The railway staff officer (all the railways were in charge of the troops during the war, and each station commanded by an Imperial officer) came up to us and asked us who we were and where we were going. We told him what our orders were.

"Clausfontein," said he, "why, that is a couple of hundred miles from here. You must stay at the hotel here to-night and see the transport officer about going on."

The Station Hotel was full, but two kindly young officers offered to bunk together and let us have one room.

"Would we give them the pleasure of our company at 8 p.m. to dinner at the transport mess?"

We certainly would! Their mess was pitched under a clump of mimosa trees, not far from the horse lines. The table, a board on trestles covered with white oilcloth, one enamel plate, ditto large mug, knife, fork and spoon, provided all that was necessary in the way of glass and silver; their dining room ceiling the star-studded vault of heaven, the walls sweet-smelling mimosa trees. Dinner cooked in an earthen oven was deftly served by regimental orderlies, and how good it tasted. Plates, etc., were taken away and washed between each course, and we had a most pleasant, friendly meal, chatting of home and town from which we had so lately come. Then we made final arrangements with the transport officer. Nearly all his animals were out, but he would do his very best for us, and we would start on our trek at 5 a.m., so after bidding our friendly entertainers "Good night" at the hotel door, we turned in for the night. Punctually at 5 there were waiting for us two Cape carts, one for ourselves and one for our baggage, each drawn by four fairly respectable looking mules, and driven by a grinning Basuto boy; and with them some of our friends of the night before, and a stranger, a Captain Seton of the Engineers, who was rejoining his com-

[1]Wynberg, a suburb of Cape Town, used as a base for all branches of the R. A. M. C. during the war, where orders, either for "home" or the "front," were awaited.

[2]Greaser, a man who keeps the runners of the sleigh slippery by passing a greasy rag constantly under them.

party at Vintersdorp, 100 miles beyond Clausfontein, and if we would accept his escort, would be very pleased to travel with us. How thankful we were not to travel those 200 miles alone we showed in our faces, and ready acceptance of his kindly offer. That day we did about 80 miles, outspanning at a small village for about four hours in the hottest part of the day, then on again until about 7 p.m., when we drew up at the farm of a Scotchman, the temporary headquarters of a troop of Cape Police. Here we stayed all night. After supper some of the Police officers came in. Miss McGregor was the proud possessor of a piano, and we "made music" and between whiles listened to thrilling tales of an "attack" on this very farm about a week ago. All the outer walls, verandahs, etc., were strongy barricaded with sand, and they had driven off the Boers without any damage to themselves, but, as one young fellow put it, they had "winged several of the enemy," and no doubt we should find them in hospital at Clausfontein, as about here the fighting was more a guerilla than a regular warfare, and the Boers had no arrangements for nursing their sick and wounded, so usually carried them to some British post, under a flag of truce; and truly we found eventually among our patients three men who had been wounded in this very attack. We also had a far from encouraging account of Clausfontein. Miss McGregor told us that it was the current belief around the countryside that there was only a sheet of tissue paper between it and the nether regions, the head was so terrific. As we were just at the beginning of the hottest month, January, we felt this was cheerful. The men told us there were a lot of sick and wounded there, and no adequate provision for caring for them, and that no doubt the establishing and organizing of the hospital would be in our hands. We were both energetic and enthusiastic young women, and felt that the prospect of making things better for the poor fellows lying there offset the heat and other probable discomforts, and so went to bed full of the work before us.

We started early the next morning, taking with us a generous basket of provisions, as we should only pass one inhabited farm that day, the rest of them being deserted, and some burnt down, through the exigencies of war. That night we camped out; the boys took out the seats of the Cape cart and piled the cushions in the bottom; these, with our rugs and canvas cover, made a fairly good substitute for a tent. We sat over the camp fire until late; it was a glorious night, no moon, but millions of unwinking gold stars set in a purple velvet sky; then wrapped in our rugs and army cloaks, our hand bags for pillows, we lay in our Cape cart, listening for a while to the chirp of crickets, the cries of the night birds, the long-drawn, mournful howling of distant jackals, the many noises of the veldt night dwellers being varied by the snores of our two boys, who slept under Capt. Seton's cart, a few yards from us. Soon we were dead to all this, and in spite of our strange couch and surroundings, slept soundly. Then the dawn! Words cannot describe it; a lightening of the sky in the east, then a saffron tint, followed by green, purple, a blazing crimson, and up jumps the sun and it is day. The boys brought us a pail of water and we made a hurried toilet. The fire was blazing merrily, the kettle boiling, and we made coffee and ate biscuits and hard-boiled eggs, the boys meanwhile reloading the carts and hammering the mules, and so we start the last stage of our trek. The early morning air was deliciously fresh, but all too soon His Solon Majesty asserts himself; we have a very steep pass to negotiate; we take pity on our mules and walk up, then a break-neck scramble down the other side, black boys shouting, mules galloping, we with our hearts in our mouths, praying that the dilopidated harness, which the boys have already repeatedly mended with strips of resin or rawhide, may hold out, at each lurch expecting a wheel to come off and ourselves to be hurled over the edge into the gulf below, nothing but a low wall being between us and a precipitous fall of at least 200 feet. After this exciting experience we drove through a beautiful valley, with a river flowing about 50 feet below us and rocky banks or branty, above, with a scrubby growth of mimosa, cactus and taibosch, all a steely grey green in colour, a family of baboons, which at first we took for Boers, hiding among the rocks at the top of the branty, wandering no doubt what we were doing driving through the blazing heat. Fortunately they did not meddle with us, Tommy, our boy, telling us: "Dey bad! Trow stone top dis fellow, kill um sure!" As we drove along we would disturb the "aasvogels"—vultures; they would lazily fly to the nearest rock or tree, flapping their great wings, too gorged by their horrid meal to go far. There down by the river bank were flocks of them, and too well we knew why they were gathered there; a reason too sadly common throughout the campaign, for there were lying the carcases of horses, hules and oxen, which have been abandoned by the troops or have been wounded; here they have laid themselves down to die, making a last effort to reach the water. The banks of every river, the track of every march, bore these sad signs of the suffering imposed on the dumb creation by war. Always my heart ached for these faithful creatures, who toiled, suffered and bled throughout the war, without thanks, often without care, spending their lives in the service of men whose quarrels and aims were beyond their comprehension. Brave and long-suffering they were; they did what they could, no man could do more! I remember an artillery officer telling me of the horrors in one battle he was in—Spion Kop, I think it was; he said he could endure to look on wounded men, but the beseeching eyes of the mangled horses upset him terribly. He obtained leave to shoot some of them, but this course where there are large bodies of men about is often very dangerous. On a night trek, too, the abandoned animals have to be left to their fate, as the noise of shooting would at once betray the presence of troops to the enemy.

At last in the distance we see a church steeple, which Captain Seton tells us is the Dutch Church in Clausfontein. We presently arrive at a stone blockhouse, fenced round with a barbed wire entanglement, the wires connected with an electric alarm inside the blockhouse. This is the outpost. The sentry gives the usual challenge, "Who goes there?" We have no countersign, but Capt. Seton speaks to him, and he calls out the Sergeant, who looks at our badges and orders. At his word the sentry lowers his rifle, and with a "Pass friends, all's well," we enter the gate and drive into Clausfontein, a dusty, tired, sorry-looking party. The Surgeon in charge is routed out; he has had no word of our coming, and so of course no arrangements have been made for us; but he gives us his room at the hotel, where we rid ourselves of as much of the dirt and grime of travel as we can. The hotelkeeper's daughter takes us to her private sitting room and brings us a delicious cup of tea. There we sit and rest for an hour or so, when Dr. Smith and Captain Seton come for us to go to the Garrison Mess for dinner. The mess was the usual board on trestles, this one pitched under some magnificent encalyptus trees, which no mosquito will come near, and which scent the air deliciously. Here all the officers (except the Commandant and his staff) attached to the various units quartered in the town, made a common mess, so we were introduced to most of our future comrades. During dinner a message came from the wife of the English Chaplain, offering us hospitality at the Parsonage until our arrangements were more settled.

In the morning Dr. Smith, the surgeon in charge, came for us and took us round the hospitals. Poor Dr. Smith, he had had a great struggle, sick and wounded coming in every day, no place to put them, no one to help him but a few untrained regimental orderlies, occasionally a surgeon attached to the columns to help him for a few days, and practically no supplies, everything having to be brought by road. The garrison at Clausfontein to feed, a place called Vintersdorp, a hundred miles further on, to supply, and two columns of about 800 men each, constantly patrolling the road to Vintersdorp; all this to be fed by food transported from the line, so the convoys were kept busy with this and had little room for medical or surgical supplies. He was using three buildings; the first two quite near, the third about half a mile away. The first building was a school, two fairly large rooms communicating with each other, both sadly overcrowded; in one were wounded, and in the other medical cases, chiefly typhoid and dysentery. The second building was a house about six rooms, in which were crowded about 20 men, one room being used for the very scanty stores. These two buildings were on the same street, the town water supply running in an open "spruit" down the side. We each took in charge one of these buildings, paying morning and evening visits to the third building, about half a mile away, being the native school, and used for the black "boys," two regimental orderlies caring for them. Altogether there were about 70 patients, and until now they had been in charge of this one poor surgeon, who looked almost worn out, and eight regimental orderlies, none of them trained men. There were some very bad enteric and dysentery cases, a few bad wounds, the heat beyond description, sanitary arrangements of the most primitive. We had no doubt about being needed here! The first day, of course, very little was done. In my wards, the school house, I had two poor fellows badly wounded—one shot in the knee, the bullet glancing off the joint and making a long, deep flesh wound, coming out the other side of the ankle; the other a deep wound in the thigh, one of the cruel "dum-dum" or explosive bullets had done this; the others were wounds and injuries of a minor condition, most of them having been brought in a few days previously, a column having been attacked on its way to Vintersdorp. Among the medical cases were two very bad enterics and a very sick man with dysentery. Sister and I comparing notes that night, found that in the matter of bad cases honours were equally divided.

Asking Symonds, my head orderly, to show me the sanitary arrangements, "Sister," said he, "they h'aint fit for to tike a lidy h'out to see."

However, I went. Directly behind the kitchen, in a wood shed, was an earthen closet; on the floor of the shed were two or three utensils in an indescribable condition. Over this domain presided a grinning black boy, who emptied all utensils from the wards; no disinfectant but a pail of sand for throwing into closet after use. I saw not much could be done out here, but made a rule that every utensil should have creolin poured into it before being carried out.

After doing the dressings it was time for temperatures; both typhoids to sponge, one 105⅖, the other 104, the dysentery 97°. I gave him brandy, wrapped him in a blanket, etc., and then told Symonds to bring water and I would sponge one typhoid while he did the other. He gaily brought out two of the dressing bowls, ran outside to the "spruit," dipped in his bowls and came back. I said nothing, but thought much. We sponged our men, Symonds doing his work wonderfully well. When the water got a little warm I asked him to change it. "Yes, Sister!" and he pranced off, scattered the germ-laden fluid broadcast in the street, and refilled our dirty bowls in the town drinking supply. I asked him if they always got their water there. "Yes, Sister; there's no other." The parsonage was above this point of the stream, but no water did we drink after this except in the form of tea or coffee or boiled.

On comparing notes that night, I found Sister M.'s experiences had been even worse. She had seen soiled typhoid sheets, hastily wrung out of water and put in the hot sun to dry. One of her men had had a very bad hemorrhage and would not live until morning. I went back with her about midnight, but we could do nothing; we stayed until the end, which came in a few hours.

For the next few days things went on in much the same way; but we could do little to improve general arrangements as yet, there being no other water supply near. However, we went to the Commandant with Dr. Smith, told him in plain language that unless some change was made the whole town would be down with typhoid. We had seen a place, a sort of boarding school, about a mile out of town, with a good water supply and flat ground for a camp, and we all felt if we could move there things would be better. By this time an R. A. M. C. Sergeant and eight men had come up from the base, and the Commandant had written back for more Sisters and another surgeon. But in the meantime a convoy bringing a lot of sick and wounded had come in, so we were terribly overcrowded, and there was more than enough work for everyone. When the convoy arrived we were all busy all night; the poor fellows had come over fifty miles, over a rough road, in wagons, and were some of them in pretty bad condition. Our scanty supply of dressings ran out before we were half through, so in despair we tore up as much of our old underclothing as we could spare, and boiling it, used that; Mrs. Marchant, our hostess, gave us all she had and scouted round among the townspeople for more. Supplies were expected every day. Poor Alexander, the lad with the wounded knee, had had two severe hemorrhages. Dr. Smith consulted with Dr. Armstrong, the surgeon who had brought in the convoy, and they decided to amputate, but with what? Dr. Armstrong's instruments were with his regiment; Dr. Smith had only a small case; but, Hurrah! with the last convoy from the railway there is a huge box labelled "R. A. M. C." Quickly the Sergeant opens it; we all hover round. Bottles of vim pills! Bottles of carbolic chrystals! Bottles of different army regulation pills and powders! No dressings! And yes, a case of instruments! Dr. Smith seizes on it, opens it, then shrieks madly! We wish to see what it contains—a complete P. M. outfit! The irony of it, and poor Alexander's leg must be amputated without delay, if we would save his life. Ghastly thought, we must use the P. M. knives. The Sergeant boils them; Sister boils an old nightdress of her own for dressings, and prepares bowls, lotions, etc. I get the poor lad ready. A screen is drawn round his bed and the leg amputated; but, alas! his strength already sapped by loss of blood, is unable to stand it, and a few hours later he dies. I had written a letter for him to his mother that afternoon; to this I add a few words telling him how the boy died, and enclosed with it a few curls of his hair and his little trinkets, and despatch it to the poor soul by the next mail. So many of these heart-breaking letters have I written, and how it hurt to see these poor lads dying so far from home. One needs to see war before one realizes the cruelty and horror of it.

The next morning Symonds asked me if I would like to see Alexander. He lay in the tent the orderlies usually slept in, the rough box that served for coffin lined with an old sheet, and flowers covering him. Our British "Tommy" has a deep fund of sentiment in him, and my eyes were dim when I saw how tender they had been with the poor lad's body.

Nearly three weeks we worked, trying to make the best of things, until one afternoon the Commandant called at the Parsonage to tell us that they had annexed the boarding school, and land adjoining it, for hospital purposes; also a farm a few minutes' walk from there had been taken for our quarters, and that a surgeon and four more Sisters were now on their way to us, also equipment for a complete Army Field Hospital. How glad we were, and yet in a way sorry to give up our struggle, for which we were being already rewarded, by faithful service from our orderlies; most of our bad cases were on the high road to health; our "commandeering" of everything that we thought would help our sick had become a joke to all the garrison; the Commandant had seen to it that all fresh milk and eggs from the district round came to us, and, most important of all, everyone was forbidden to use the water from the spruit for drinking or cooking; rough water carts had been made, and water carried in from a deep pool in the river, so our fight had not been in vain.

In another month we were well settled in our new quarters. There were two surgeons now, six Sisters, and a good staff of orderlies. We had a well-laid-out camp, with accommodation for 200 men, and things running smoothly.

Clausfontein was the base from which supplies were carried up to the garrison and people of Vintersdorp, about 100 miles away. A column would start out every ten days or so, convoying a huge transport. They passed our camp, usually starting at dusk, and making night marches. We always came out to wish them "Good luck and a safe return." Always we had a "choky" feeling when doing so. It was sad to see them march away so gaily, generally singing some jolly ditty, not knowing how many of them would come back to us sick or wounded, perhaps crippled for life, or who would be left in a lonely grave by the wayside. The Boers were very active round here, and while there were never any big fights, the incessant sniping and guerilla warfare was very trying to the nerves and temper of our men. As one of them said, "If only we could get a good slap at them it wouldn't be so bad, but to be stalked like deer and shot down from behind rocks is maddening."

We would receive a message from the outlying blockhouses that a sick convoy was coming. Immediately all would be busy getting ready; we would see the Red Cross waggons, drawn by teams of bullocks, come toiling over the rough veldt, and wonder what their freight would be; the Sergeant and his men drawn up with their stretchers by the roadside, and the poor fellows would be carried in, sometimes twenty or thirty of them, some just reaching us to die, some already dead, some almost moribund would slowly fight their way back to life. There was a humorous side, too. On one occasion we were all ready for emergencies, beds, bandages,

dressings prepared, stretcher-bearers waiting; up rumbled three R. C. waggons, and from one of them a laughing "Tommy" jumped out. "I guess I am all the Boers got this time, Sister." He had had a couple of fingers shot off.

One day at noon we were startled by the alarm bells ringing, the bugles blowing to quarters, and a cry of "Fire." We looked across to the town; it was one mass of flames. For the past few days a wind had risen at noon; if this had happened to-day the whole town would have been razed to the ground. Providentially the air was dead calm; as it was, a number of the mud-walled, straw-thatched houses, dry as tinder, were burnt down, and only a hard fight saved the rest. A few hours and it was over, but that night a very strict guard was kept, the outposts doubled, the whole garrison on the alert. Just before dawn the expected happened, firing from the blockhouses and outposts announced the advent of the Boers. They made a very determined attack; our garrison was only small, the two columns being both on the road to and from Vintersdorp; of this fact the enemy had taken advantage. We, of course, were quite safe, protected by the Red Cross flag, but it was a strenuous and exciting time, the bullets flying over us from both sides, and it was far from pleasant to hear them whistling past us. The artillery was not much use in an affair like this, as the enemy were scattered and firing from the rock-strewn kopjes, but a few shells from the big guns were sent on to the kopjes just to show what we could do. All the townspeople had been ordered into the two churches, both stone buildings, and we heard afterwards what a funny sight it was to see them scuttling in, some with pots and pans, others with huge bundles done up in rugs, etc. Stern measures had to be resorted to to get them in finally, as, womanlike, they would keep running back for some treasured household god they wanted to save, and by this time the Boers were firing directly into the town. By 9 a.m. quiet was restored, the enemy dispersed, a few more wounds on our side, and some days later two or three wounded Boers came in. The man who started the fire was eventually found, and he confessed that it was a plot; they hoped with the help of the wind to destroy most of the town, also the ammunition, which was kept in the old Court House, which narrowly escaped the fire. Only the absence of wind saved us. He was unable to communicate the non-success of the plot, as such a strict guard was kept that night.

Peace at last! How glad we are. For some time past our work has been very light. Our faithful Symonds and the other regimental orderlies have orders to rejoin their regiment and sail for home, to take part in the Coronation festivities. How excited they are. Symonds rushing out, his eyes rolling more wildly than ever. They are to be commended to their Colonel for their good work.

We had a Thanksgiving Service for peace, in the Dutch Church, all the garrison and the townspeople went to it and it was held in Dutch and English. That very afternoon I had to give in, and went to bed knowing I had enteric. However, the attack was not a very desperate one, and after a month in bed I am able to sit in a chair at my tent door. In a week I shall start the trek for the Coast, and then home. The Boer commandos have laid down their arms and come in at last, but even after peace was declared they fought on stubbornly until General Smuts went out to them and told them that if they persisted they would be outlawed and executed. They are now camped across the valley, and as I sit at my tent door I can see their fires and hear them singing their evening Psalm, their voices raised in a slow-weird chant, which sounds very solemn; the garrison bugles ring "Lights out," the long-drawn note of the "Last Post" dies out; behind the distant hills the purple, green and gold glory of the sunset is fading away, and I am myself constrained to lift up my evening Psalm of thanksgiving for restored health and for the peace which has put an end to the horror and suffering, of which we have seen so much during the long war.

A. HAYHURST.

2 Walnut St. S., Hamilton.

THE CANADIAN NURSES' ASSOCIATION AND REGISTER FOR GRADUATE NURSES—ESTABLISHED 1895—INCORPORATED 1901.

President—Miss Baikie.
Vice-Presidents—Miss Colquhoun and Miss DesBrisay.
Recording Secretary—Miss Phillips.
Corresponding Secretary—Miss Colley, 133 Hutchinson Street.
Treasurer—Miss DesBrisay (acting).
Registrar—Mrs. Berch, 175 Mansfield Street.
Reading Room—The Lindsay Building, Room 611, 518 St. Catherine Street.
Lectures—From November until May, inclusive, in the Medico-Chrurgical Society's Rooms, the first Tuesday in the month at 8 p.m.

Committee Meeting—The first Monday of each month at 3.30 p.m. in the Lindsay Bldg.

Miss Colley, Corresponding Secretary C.N.A., has gone for a two months' holiday to the Maine coast.

Many of our members have left town. Some for a holiday and well-earned rest. Others for work in the country and on the Lower St. Lawrence.

The lecture course is over until October, and things are very quiet here.

We regret to hear that Miss Armstrong (M. G. H.) has had to give up her work for a time owing to ill-health.

Miss Maud Welch (M. G. H.) has gone on an extended trip to the Western States.

REPORT OF THE VICTORIAN ORDER NURSE ENGAGED IN TUBERCULOSIS WORK AT THE ROYAL EDWARD INSTITUTE, MONTREAL.

A Victorian Order nurse is employed for class work and home visiting. The class work was organized in December, 1908, and since then 16 patients have attended once a week and have received treatment and instruction, how to destroy the germs in the lungs and how to build up their strength. Home help has been given in the form of awnings, reclining chairs, blankets, etc.; at times rent has been paid, through the kindness of friends.

Five members of the class have been able to return to their work, four are now taking active exercise again, four are improving steadily, and improvement is noted in the rest. There have been no deaths. 3,812 quarts of milk were distributed to these patients, eggs given them and clothing as required.

The total cost of the class amounted to $838.48, defrayed by Emmanual Church. The Victorian Order nurse receives half her salary from the Church Fund, and her board and lodging from the Royal Edward Institute. The Victorian Order pays the rest of the salary.

With regard to the advanced cases of tuberculosis, 2,488 visits have been made during the year by the special tuberculosis nurse, who had an assistant for four months; 151 patients were thus visited. The nurse found it much less difficult this year than the last to get the patients to fulfil the conditions necessary for improving their health. Most gratifying results have been noted in the cleanliness of th ehouses; walls have been whitewashed, beds kept tidy, and separate cots used for the tuberculosis cases. Families have also been influenced to move from bad surroundings and poor houses to healthier localities. Quite an exodus, due to the nurse, will take place the first of May. The nurse also reports houses for disinfection and sees that it is done.

Relief has been given in the way of clothing and food, and one girl has been sent to Brehmer Rest for a cure of several months, which will save her from the fate of her father and sisters—death from tuberculosis.

Of course there are unprofitable cases, such as the following: A family living in a dirty condition—even the bed had to be scrubbed—mother a tubercular case, advanced and hopeless; six children, who were placed away from danger in homes by the nurse. Within three days they were all brought home to the mother, who insisted on keeping them with her till her death, with bad consequences to them all and to one child in particular. Fortunately this does not represent the general attitude of the patients, who are almost all grateful and eager to improve their condition and that of the family.

March 3rd, 1910.

A post-graduate course in district nursing—four months—is given at one of the three training centres of the Order, at Ottawa, Montreal, or Toronto. For full information, apply to the Chief Superintendent, 578 Somerset Street, Ottawa, to the Montreal District Superintendent, 29 Bishop Street, Montreal, or to the Toronto District Superintendent, 206 Spadina Avenue, Toronto.

Many positions requiring nurses with superior qualifications and marked executive ability are filled from the ranks of the Victorian Order Nurses every year.

The Guild of Saint Barnabas

CANADIAN DISTRICT

MONTREAL—St. John Evangelist, first Tuesday Holy Communion at M. G. H., 615 a.m. Second Tuesday, Guild Service or Social Meeting, 4 p.m. Third Tuesday, Guild Service at St. John's, 8.15 p.m. Last Tuesday Holy Communion at R. V. H., 6.15 a.m.

District Chaplain—Rev. Arthur French, 158 Mance Street.

District Superior—Miss Stikeman, 216 Drummond Street.

District Secretary—Miss M. Young, 36 Sherbrooke Street.

District Treasurer—Mrs. Messurvy, 37 Church Street.

TORONTO—St. Augustine's Parish House, 8 Spruce Street, last Monday, 8 p.m.

Chaplain—Rev. F. G. Plummer.

Superior—Mrs. Broughall (pro tem).

QUEBEC—All Saints Chapel, The Close. Guild service, fourth Tuesday, 8.15 p.m.

Chaplain—The very Rev. the Dean of Quebec.

Superior—Mrs. Williams, The Close.

OFFICIAL DEPARTMENT.

Queen Alexandra's Imperial Military Nursing Service.

The Canadian Permanent Army Medical Service (Nursing Branch).

The Canadian Society of Superintendents of Training Schools for Nurses.—President, Miss Brent, Superintendent Hospital for Sick Children, Toronto; Secretary, Miss Scott, Superintendent Grace Hospital, Toronto.

The Canadian National Association of Trained Nurses. — President, Miss Snively, Toronto General Hospital; Sec. Treas., Miss F. M. Shaw, General Hospital, Montreal.

The Association of Hospital Superintendents of Canada.—President, Mr. H. E. Webster, Secretary Royal Victoria Hospital, Montreal; Secretary, Dr. J. N. E. Brown, Medical Supt. General Hospital, Toronto.

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Editorial

THE CONVENTION NUMBERS.

We trust our readers will pardon the omission of our regular departments for July and August, in order to make room for the important proceedings of two professional associations. The Departments will be continued as before in our next issue.

NINETEEN-FOURTEEN, THE YEAR YOU WILL GO TO WINNIPEG.

Do not forget it. Winnipeg has given half a million dollars for it. There is to be a great World's Fair then in Winnipeg, in commemoration of the beginning of the Great West by Lord Selkirk's Settlement, one hundred years ago. And it is hoped, in accordance with the kind and welcome suggestion of Miss Wilson, Superintendent of the Winnipeg General Hospital, that the Canadian Society of Superintendents of Training Schools for Nurses will then hold its Annual Meeting in Winnipeg. Everyone was at once in favour of this. In fact, at the recent meeting nothing was more gratifyig to the Executive than the presence of Miss Wilson, of Winnipeg; Miss Scott, of Calgary; Miss Blakely, from Yorkton, Sask.; Miss Hersey, from Montreal; Miss Mackenzie, of Ottawa; Miss Malony, from Quebec, and other ladies from Ottawa, Halifax and Charlottetown. Remember Nineteen-Fourteen, the year you will go to Winnipeg.

PROFESSIONAL CRITICISM.

"That in view of the marked decline of interest in nursing as a profession by the graduates of more recent years, this association feels that this reflects and foretells a lower professional standard, which must inevitably react not only to the disadvantage of the Training Schools as such, but to the standing of the profession at large; and recommends that steps be taken by the Superintendents of Training Schools to more thoroughly inculcate in undergraduates the ethics of the profession and the importance to the undergraduate herself of taking an active interest in association work. And that a copy of this resolution be forwarded to the Canadian Society of Superintendents of Training Schools for Nurses."—Moved by Mrs. Paffard, seconded by Miss Crosby.

The above resolution speaks for itself. It is a most important one and serves to show that whatever else may be the faults of our profession, we have not lost the power of self-criticism.

"And being younger," says Socrates, "they will be more severe with you, and you will be more offended with them." One or two of the more experienced of the Superintendents "spoke thus much to mitigate the justice" of the plea of others, but on the whole there is no doubt it is the hope of all to raise the standard. The same hope is apparent in the following communication from a highly esteemed member of the profession:—

"An article from one of the Far West newspapers has caused me much surprise. It states there is reluctance on the part of nurses to go to the country to nurse the sick. This article relates how 'twenty nurses' in a western city were interviewed before one could be found to go, even though the case called neither for 'privation nor hardship.'

"Can it be possible nurses who are trained for all emergencies will refuse to do work which is so important as that mentioned? Are our Canadian nurses at home of less staunch material than the Canadian nurses who are standing in the front in missionary and philanthropic work in the past and to-day? She generally takes pleasure in the difficulties she can overcome, rather than shirk, and neither does she consider herself a martyr when she mounts the 'altar of duty.'

"The writer has been a western nurse, and cannot allow this to pass without calling the attention of sister nurses to the necessity of so filling our position as to silence such remarks as these just mentioned."

Yet let us not "despair of the republic" of nursing, as Cæsar would say. Its heart is in the right place.

HOSPITALS AND NURSES

Arcola, Sask., is to have a hospital.

Miss F. M. Shaw, M.G.H., is now at St. Agathe, Quebec.

The Royal Island Hospital, Kamloops, B.C., is to be enlarged.

Plans are made to establish a hospital at Port Daniel, Quebec.

Miss McNaughton Jones has gone East for a month or six weeks.

The funds have practically been raised for a hospital at Ladysmith.

A new building for the Children's Hospital at Winnipeg is to be erected.

Miss Sylvia Edwards is in charge of the Victorian Order district, London, Ont.

Miss Barbara Keast has gone to Seattle to reside, where she will do private nursing.

Vancouver is preparing plans for an Isolation Hospital, to cost not less than $20,000.

Miss Murray, late of Grand Rapids, Michigan, is convalescing from an attack of pleurisy.

Miss Katie Brock is now in charge of "K" private wards at Montreal General Hospital.

The enlargement of the General and Marine Hospital at St. Catharines is contemplated.

The Winnipeg Branch of the Victorian Order of Nurses has just added a sixth nurse to the staff.

The plans have been adopted for the new Royal Columbian Hospital at New Westminster.

Miss A. E. Bushfield has succeeded Miss Woodland as Superintendent of the Western Hospital, Toronto.

The annual meeting of the Graduate Nurses' Association of Nova Scotia takes place in Halifax in September.

Miss Helen Budd and Miss Charlotte Hughes are on the staff of the Queen Victoria Hospital, Revelstoke, B.C.

Miss Mayou is to take a well-earned rest and holiday before taking up active work again with the Victorian Order.

Miss Bertha R. Steeves, V.O N., has been appointed Superintendent of the Rosamond Memorial Hospital, Almonte, Ont.

Miss M. A. Hetherington has accepted the position of Head Nurse at the Chipman Memorial Hospital, St. Stephen, N.B.

Miss MacWilliams, graduate of the Royal Alexandra Hospital, Fergus, is the Superintendent of the new General Hospital at Oshawa.

Miss C. Bernice Bell, C.M.H., 1910, intends spending the summer at Laymouth, N.B., before taking up private nursing in St. Stephen, N.B.

Edmonton is to have a City Hospital, to cost not less than $250,000. It is expected that it will be ready for occupation in October, 1911.

Dr. W. A. Lincoln, Calgary, has been appointed Medical Superintendent of the new General Hospital. His duties commenced June 30th.

Miss Moore, Superintendent of the Welland County Hospital, has resigned, and Miss Regan, Head Nurse, has been appointed to succeed her.

Miss Agnes G. Wickham is convalescing most satisfactorily from a long, tedious illness in the bracing air and brilliant sunshine of Lytton, B.C.

Miss Margaret Cuthbertson, V.O.N., has been appointed to succeed Miss Edith Mayou. She sailed from Quebec for Harrington, Labrador, early in June.

Miss Maida I. Hoyt, C.M.H., St. Stephen, N.B., is spending a few weeks with her mother. Later she intends doing private nursing in St. John, N.B.

Miss Robina Stewart, graduate of Johns Hospkins Hospital, Baltimore, enters on her duties as Lady Superintendent of Toronto General Hospital, September 1st.

Miss Macfarlane, V.O.N., has been sent to take charge of the newly opened hospital at Chase, B.C. This is the third hospital opened under the Revelstoke Hospital Society.

The Alumnæ Association of Riverdale Hospital Training School for Nurses, Toronto, gave a linen shower to Miss Lush on the evening of April 7th in Miss Mathieson's apartments.

Miss Margaret D. Hetherington, a graduate of the C.H.M., St. Stephen, N.B., has resigned her position at the St. Croix Hospital and gone to Winnipeg, Manitoba, to do private nursing.

Miss Jessie M. Forbes, a graduate of the Chipman Memorial Hospital, St. Stephen, N.B., has accepted the position of Lady Superintendent of Dr. Stover's Sanitarium at San Luis Obispo, California.

The M.G.H. Alumnæ Association has affiliated with the Montreal Local Council of Women. The representatives to the Council are: Miss K. H. Brock, Miss Brown, Miss Strumm, Miss Dunlop, Miss Lee and Miss M. Vernon Young.

The Commencement Exercises of the Tenth Graduating Class of the Training School for Nurses of Lakeside Hospital, Cleveland, were held at the Hospital Building on Friday afternoon, May 27th. A large class of thirty-one nurses received their diplomas.

The graduate nurses of Hamilton arranged a picnic in Dundurn Park for the afternoon of June 25th, in honor of the graduating class. The weather was ideal, as was everything in connection with the outing, and the afternoon was thoroughly enjoyed by all. Miss Christie and Miss Crosby, from Toronto, were among the guests.

The annual meeting of the Alumnæ Association of Grace Hospital Training School for Nurses was held in the Nurses' Residence on Tuesday, June 14th. The officers for 1910 were elected as follows: President, Miss De Vellin; First Vice President, Miss McKeown; Second Vice-President, Miss McMillan; Secretary, Miss Allin; Treasurer, Miss Macpherson.

The second annual dance of Victoria Nurses' Club was held in the A.O.U.W. Hall, April 6th. The hall was prettily decorated with flags and ivy, the floor was good, the orchestra excellent, and the attendance large. All present had an enjoyable time. The supper room, in which the dainty supper was served at midnight, was decorated with daffodils and smilax. After all expenses were paid, one hundred and seventy-five dollars remained to be added to our Sick Nurses' Fund.

The Lady Minto Hospital, Melfort, Manitoba, conferred its first diploma on May 30th. Miss Lottie M. Gibson was the happy recipient. A large and enthusiastic gathering took part in the ceremony and wished the graduate god-speed. Mr. R. Beatty presented the medal and diploma, and spoke of the splendid work done by Miss Gibson in this hospital, which had proved such a blessing to the community. The Ladies' Aid provided a social hour at the close, when Miss Gibson's many friends offered their congratulations and good wishes.

Miss Tottie Segsworth, graduate of Grace Hospital, Toronto, gave the members of her Alumnæ Association a very pleasant afternoon at her summer home on the Island on Saturday, June 18th. The guests gathered on the wide verandah in front of the house where a social chat was enjoyed and afternoon tea was served. After this they motored around the bay and were taken home in a motor boat. This is the second summer Miss Segsworth has entertained the nurses in this way. Although many found it impossible to be present on Saturday, yet all are grateful to Miss Segsworth for her thoughtfulness and kindness.

Miss Snively's watchword for Class 1910:

Work thou for pleasure: paint or sing or carve,
The thing thou lovest, though the body starve,
Who works for glory misses oft the goal;
Who works for money coins his very soul;
Work for the work's sake, then, and it may be
That these things shall be added unto thee.

The anual meeting of the Montreal General Hospital Alumnæ Association was held on April 8th, 1910, and the following officers were elected for the ensuing year: Hon. President, Miss Livingstone; President, Miss K. H. Brock; First Vice-President, Miss Edith Cowen; Second Vice-President, Miss Dunlop; Recording Secretary, Miss S. E. Brown; Corresponding Secretary, Miss Ethel Lee; Treasurer Miss M. Vernon Young.

Executive Committee—The Misses Strumm, MacMartin, Smardon, Macgregor, Stewart, MacDougall.

Reception Committee—The Misses K. Brock and Louise McLeod.

Registry Committee—Miss Maud Brock (chairman), the Misses Hutchins and Putnam.

Registrar—Miss M. Vernon Young.

The graduating class of the Toronto General Hospital were the guests of Mrs. Baily (Miss Orchard), 118 Spadina Road, on Wednesday evening, May 5th, 1910, to meet the members of the Alumnæ Association.

The Honorary President, Miss Snively, the President, Mrs. Findlay, and others, spoke words of welcome to these new members of the Association.

During the evening each of the graduating class dressed a doll, having to assist her as "probationer," an older graduate. The prize for the best dressed doll was awarded to Miss Allen. Later there dolls will adorn the fancy work booth at "A Rout in Old Toronto," which is to be held in aid of the Georgina House. This proved a most excellent way of becoming acquainted.

Miss Tipp delighted everyone by her rendering of several piano selections.

This was one of the most successful social evenings the Alumnæ has ever had, and they are expecting great things from this promising contingent.

The Graduating Exercises of the McKellar General Hospital Training School for Nurses, Fort William, took place on the evening of June 29th. A large and interested gathering witnessed the presentation of diplomas, which ceremony was performed by Dr. class. Miss Davidson read the first report of the Training School, showing a staff of Smellie, M.P.P. President J. H. Perry presided. Dr. Smellie addressed the graduating class. Miss Davidson read the first report of the Training School, showing a staff of Assistant Superintendent, Night Supervisor, graduate in charge of operating room, three graduates in charge of wards, thirteen pupil nurses and two probationers. A class of three received diplomas—Miss Isabella Johnston, Miss Denham Susan Beattie, and Miss Bessie Stewart. Addresses were also given by Dr. Birdsall and Mr. J. R. Lumbly.

A social hour, interspersed with music, brought this interesting ceremony to a close.

On Wednesday evening, June 1st, the Registry Committee held a very successful birthday party. A large number of nurses were able to be present and all seemed to enjoy themselves.

The Rev. Prof. W. T. Hallam gave the opening prayer, and afterwards gave a short address on the life and work of the nurse.

After the address of the Chairman, Mrs. Downey gave her report, which will be printed in full.

Miss Kennedy, President of the Florence Nightingale Association, gave a brief outline of their work since the formation of their Association.

Miss Barwick's paper, read at the meeting of the Canadian Association of Superintendents of Training Schools, was read by Miss Crosby, who also spoke about The Canadian Nurse and the advisability and necessity of obtaining registration.

After the business meeting, everyone adjourned to the refreshment room, where a social hour was much enjoyed by all.

The Medicine Hat Hospital was built in 1889 to accommodate 22 patients and nursing staff. A separate building was erected in 1895 for maternity cases to accommodate five patients. This was enlarged in 1904 to accommodate eleven patients.

A Nurses' Home was built in 1904 to accommodate twenty nurses. This is now overcrowded and will have to be enlarged next year.

In 1907 a new wing was added to the general building, increasing its accommodation to sixty-five beds.

A new wing to the Maternity Hospital is in course of construction this year, which will increase its accommodation to twenty-five beds, making a total hospital capacity of ninety beds.

The nursing staff consists of Lady Superintendent, Assistant Superintendent, graduate in charge of operating room, and graduate in charge of maternity. Pupil nurses in training twenty.

The report of the Board of Examiners appointed by the Provincial Secretary for the purpose of conducting the examinations of the nurses in the different hospitals for the insane was issued recently.

Saturday, June 4th, was Hospital Day in Vancouver, B.C., when the Women's Auxiliary of the General Hospital made their annual appeal for donations for the work of the hospital. The following from The Daily News-Advertiser will give some idea of the extent and success of the work of this society of 175 active members, and of which Mrs. C. H. Gatewood is President:

Throughout the past year the auxiliary has continued to supervise the linen department, which is not only kept in constant repair, but replenished from time to time. At the sewing meetings, held during Lent, a large quantity of garments for the use of patients, as well as operating gowns, were got ready.

A noteworthy feature of the society's work has also been the furnishing of an infants' ward in the new wing, the complete patients' and surgical equipment, such as electrical pads, pasteurizing apparatus, etc., being also donated from the proceeds of last hospital day's canvass. An approximate expenditure of $700 was also made in furnishing twelve rooms of the Nurses' Home.

Over $5,000 was subscribed by the general public, an action that would seem to possess a two-fold significance, being, on the one hand, a practical expression of sympathy with the alleviation of physical suffering, and, on the other, a tacit recognition of the capability with which the members of the auxiliary have, in the past, administered the funds entrusted to them.

In April, the graduate staff of M.G.H. gave a "weighing party," the proceeds to form a nucleus for a Sick Benefit Fund. The following is the form of invitation issued:

MONTREAL GENERAL HOSPITAL.

The graduate staff of the "General"
Invite you one and all,
To come to their "weighing party,"
T'will be held in Governor's Hall

On Saturday, April the second,
From four to six of the day,
All will be ready to weigh you,
And a cent per pound you must pay

To a Sick Benefit Fund for Nurses,
This amount we propose to apply,
So loosen the strings of your purses
And down to our party hie.

A cordial welcome awaits you,
This is where we do our part,
So we'll look for your bodily presence
Should the object appeal to your heart.

The party was a great success and over $300 (three hundred dollars) was realized. To this amount several donations and subscriptions have been added.

Last year carefully prepared regulations were issued and each hospital for the insane in Ontario to which acute cases are admitted was required to establish a Training School for Nurses. A three years' course of study was decided upon, so that at each institution a uniform system of instruction would be followed. The examinations were both written and oral. The papers were prepared by a special board of examiners named by the Honorable the Provincial Secretary. The written papers were examined by physicians in the different hospitals, and orals were conducted by the Board of Examiners at London, Hamilton, Toronto, Kingston and Brockville.

The names of the successful candidates were as follows:

Junior Year—Mary Atkinson, Elizabeth Brookshaw, Kate Boyer, Florence Beirne, Mamie Brown, Florence Ball, Luella Bigford, Margaret Cameron, Ella M. Carr, Gertrude Dodds, Elizabeth Flynn, Leita Frink, Clara Grant, Margaret Gifford, Irene Heaslip, Margaret Harvey, Edith Hillier, Kathleen Hutchinson, Kate Jeannings, May Kirkwood, Jennie Mulligan, Kate Murray, Sadie Murphy, Minnie Mallette, Agnes McGregor, Lily McNichol, Maggie McDowell, Elizabeth McCutcheon, Kathleen McGarrity, Margaret McGhie, Susan McCaffrey, Sadie Planque, Alice Patterson, Sayde Sharpe, Cassie L. Shaw, May Sharpe, Lilian Stewart, Helen Slade, Maud Seeler, Edith Towsley.

Intermediate Year—Lily Blaney, Mary Cardwell, Alice Carpenter, Florence Catto, Lexie Clarke, Mabel Collison, Christina Morris, Lily Mathews, Elizabeth Mills, Jean McDermott, Jessie Parsons, Sarah Rea, Ellen Redmond, Edith Race, Edna Scott, Mary Sleesor, Addie Snider, Pearl Sills, Margaret Sullivan, Edith Sheridan.

Senior Year—Lily Beirne Nellie Burns, Kate Black, Nellie Cave, Charlotte Grieve, Frances Krause, Annie Malkin, Ethel Murray, Margaret O'Donnell, Marie Stiffler, Lizzie Woods.

The following, who had previously taken the three years' course and passed all the examinations, presented themselves and passed creditably the examinations of the Provincial Board.

Extras—Maggie Elliott, Mary McNamara, Louise Stevens, Helen Kildea, Catherine Cassity, Mary Carson, Sarah R. Hodgson Frances Walker—The Globe.

Mr. Henry Phipps, of New York, has selected the University of Pennsylvania to carry on the work of the Phipps Institute. Mr. Phipps has already acquired ground in Philadelphia on which will be erected a hospital for this purpose. The extent of the benefaction exceeds $5,000,000.

The report of the committee appointed to consider the future policy of the Institute has been approved by Mr. Phipps and the Trustees of the university.

The work will be divided into three general departments, each of which will be presided over by a director. For the directorship of the laboratory, Dr. Paul Lewis, now of the Rockefeller Institute, has been selected. For directorship of the sociological department, Mr. Alexander M. Wilson, of the Boston Association for the Relief and Control of Tuberculosis. Dr. H. R. M. Landis has accepted the appointment as director of the clinical department.

In addition to a board of eight directors, who will be directly responsible to the Trustees of the university, an Advisory Council has been created and will meet annually at the Institute. The following have accepted the invitation to serve as members of this body: Dr. Samuel G. Dixon, Harrisburg, Pa.; Dr. S. McC. Lindsay, New York City; Dr. William H. Baldwin, Washington, D.C.; Dr. Hermann M. Biggs, New York City; Dr. William H. Welch, Baltimore, Md.; Dr. Theobald Smith, Boston, Mass.; Dr. Gideon Wells, Chicago, Ill.; Dr. Simon Flexner, New York City; Dr. James A. Miller, New York City; Dr. Lawrence Brown, Saranac, N.Y.; Dr. Henry Baird Favell, Chicago, Ill., and Dr. James Pratt, Boston, Mass.

The graduating exercises of the Training School for Nurses, in connection with the Toronto Hospital for Incurables, were carried on with a swing and a verve that made it not only the culminating point in an arduous training for the graduating class, but a very pretty and attractive social event as well.

Sir William Mortimer Clark, K.C., as chairman, made a brief address on the history of the institution. Miss Forsyth, Lady Superintendent, gave the report of the Training School for the year, speaking with special enthusiasm of the new Nurses' Residence, and the President's address, by Mr. Ambrose Kent, was listened to with great attention. He stated that $20,000 had still to be raised to pay the debt on the new building. Dr. N. A. Powell made an eloquent address to the graduating class concerning their profession, and the ideals of those who practised it. Two solos by Mr. H. Buthven McDonald, and violin solos by Miss Eveline Fenwick were warmly applauded.

The event of the evening was the presentation of diplomas to the graduating class by Lady Mortimer Clark. The eleven members of the class were: Miss Alma Fell, Cookstown; Miss Beatrice Ellison, Toronto; Miss Florence Evelyn Thompson, Virgil; Miss Mary Elizabeth Nicholls, Port Huron, Mich.; Miss May Evelyn Bath, Toronto; Miss Mary Alice Cochrane, Ridgetown; Miss Ella Smith, Sharon, Penn.; Miss Sarah Watkins, Grafton; Miss Mattie Stinson, Thorndale; Miss Hazel Grierson, Toronto, and Miss Annie Robinson, Belleville.

The prizes and medals were awarded as follows: Kent gold medal, presented by Mrs. Ambrose Kent, to Miss E. Smith; silver medal, presented by Dr. W. H. Pepler, on behalf of the Examining Board, to Miss Beatrice Ellison; third prize, given by Mrs. G. R. Baker, presented by Miss Forsyth, to Miss Mary Nicholls; prize for neatness of room and person, presented by Mrs. R. B. Hamilton, to Miss Hazel Grierson; token of recognition to nurse who has displayed the true spirit of nursing throughout her course of training, devotion to duty, kindness, tact and patience, presented by Mrs. John Sloan to Miss Mary Cochrane; prize for best kept lecture and class books, presented by Miss Forsyth, Lady Superintendent, to Miss Mary Nicholls; prize for best paper on Massage, presented by Mrs. Grant Macdonald, to Miss Mary Cochrane; and prize for best administratrix of massage, presented by Mrs. Herbert Clutterbuck, to Miss May Bath.

The annual meeting of the Winnipeg General Hospital Nurses' Alumnæ Association took place on May 9th, at the Nurses' Home. The Secretary-Treasurer's report was submitted and showed an increase of members and a good financial standing. The Registrar's report was very encouraging, the registry being now more than self-supporting.

The reports having been adopted, Miss Johns, in her retiring address, gave a resume of the work accomplished during the year. The Association had the pleasure of entertaining Dr. MacMurchy, editor of The Canadian Nurse, and had derived fresh stimulus from her visit, and it has the prospect of welcoming other distinguished visitors in the future. Miss Snively, whose long and honorable connection with Toronto General Hospital has just been severed, and who it is hoped will come West during the summer; Miss Crosby and Miss Isabel Stewart.

The President's address referred also to the good work done by the Registrar, and spoke of the work of the Sick Visiting Committee. The Journal Committee also received honorable mention, and it was pointed out with satisfaction that our modest quarterly is

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almost able to pay its own way, besides forming a strong connecting link between our far-scattered members.

Sympathetic allusion was also made to the death of Isabel Hampton Robb, whose influence for the higher education of nurses has been of incalculable benefit to Western nurses, as to all others of her profession. A resolution was passed by a standing vote conveying the sympathy of the Association to Dr. Hunter Robb. Perhaps the most vital element in the year's work was the growth of good feeling between the Alumnæ Association and the sister society, the Manitoba Association of Graduate Nurses, with increased possibilities of co-operation on the question of State Registration.

During the year the Association had the pleasure of listening to lectures by Dr. Halpenny and Dr. Jones, the American Consul-General, the former on his trip abroad, and the latter on his experiences as American Consul in Japan. On both these occasions the M.A.G.N. had been the guests of the Alumnæ Association.

Votes of thanks were passed to Miss Wilson for her kindness in permitting the Association to use the drawing rooms of the Home as a meeting place, and to Miss Hood, the retiring Secretary-Treasurer, for the zeal she had displayed during her three years of office.

Mrs. Moody then took the chair for the election of officers, which resulted as follows: President, Miss Johns; First Vice-President, Miss Hood; 2nd Vice-President, Miss Gilroy; Secretary-Treasurer, Miss Mabel Gray; Assistant Secretary-Treasurer, Miss Burns; Convener of Social Committee, Mrs. Bruce Hill, Convener of Sick Visiting Committee, Mrs. Ross Mitchell; Convener of Lookout Committee, Miss Winslow. The meeting, which was well attended, over thirty members being present, then adjourned to partake of afternoon tea.

The graduating exercises of the Orillia General Hospital were held in the Y.M.C.A. building on Saturday evening, May 28th, before a large gathering of invited guests. The hall was beautifully decorated and presented a festive aspect fitting this very important occasion. Mr. T. H. Sheppard, President of the Hospital Board, presided and opened with a short address.

Miss Johnston, Superintendent of the hospital, submitted her report, which showed the hospital to be in a flourishing condition and doing good and effective work. The staff consists of the Superintendent, one Head Nurse and twelve nurses in training. Class of five are the first graduates of the Training School.

Great praise is due the Women's Auxiliary of the Hospital for the splendid work done by them in furnishing supplies for the hospital, in beautifying the grounds and in providing a beautiful and comfortable home for the nurses.

Mr. Sheppard presented the diplomas to the graduates—Miss Mary A. Congalton, Miss Margaret Campbell, Miss Margaret Glennie, Miss Maud L. Nash, and Miss Margaret R. Campbell.

Miss Beaton, President of the Women's Auxiliary, presented the medals.

The graduates were also presented with sheafs of beautiful roses.

Miss Johnston presented her prizes for massage to Miss Glennie and Miss Congalton.

Mrs. Hamilton, who has taken a deep interest in the hospital, presented her prizes for neatness to Miss Glennie and Miss M. Campbell.

Dr. Ardagh presented the prize for anatomy and physiology to Miss Glennie.

Dr. Bruce Smith, Provincial Inspector of Hospitals, addressed the graduates, giving them much good advice. He spoke of a nurse's duty to her patient, to the physicians, to the community and to herself. "Let them but to themselves be true and they could not be false to any other interests."

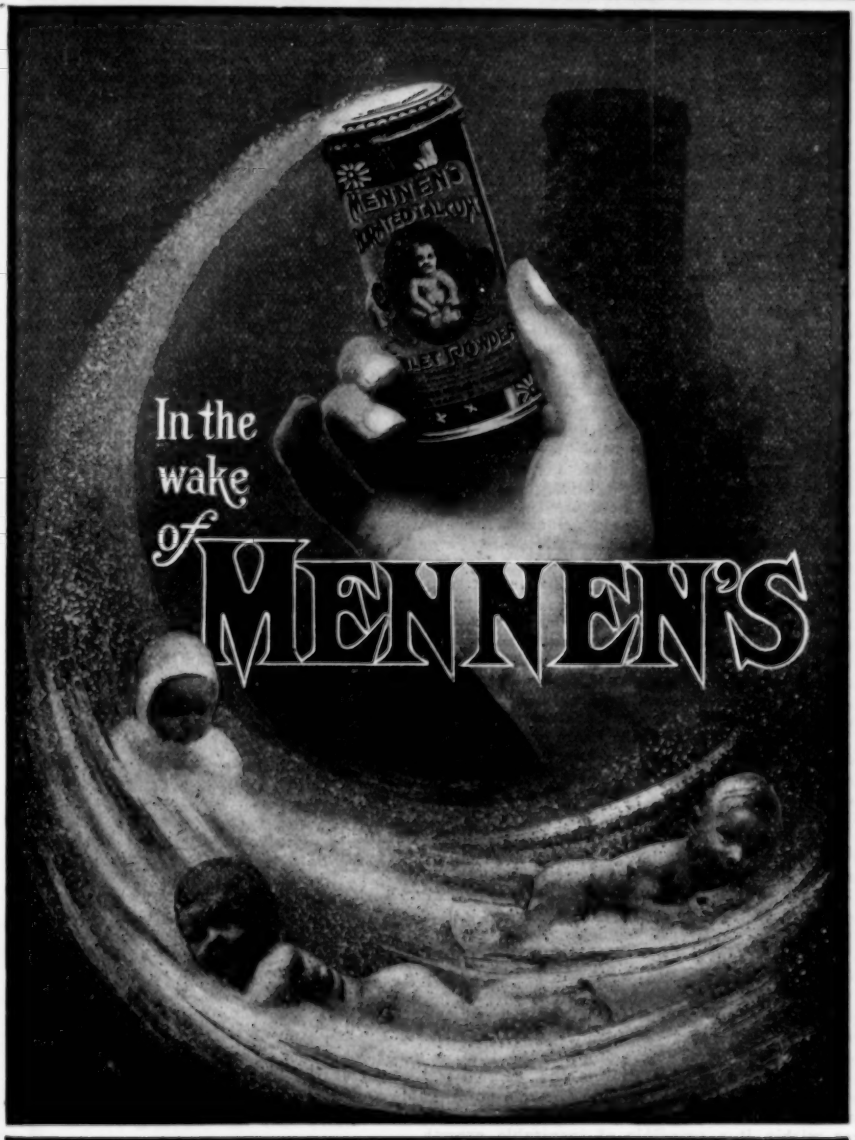
Dr. Ardagh, in his address, emphasized the duty of the nurse to her Alma Mater in addition to those enumerated by Dr. Smith.

Refreshments were served at the close of the programme and a most pleasant social hour was spent.

The annual meeting of the Alumnæ Association of the Kingston General Hospital Training School for Nurses was held at the Residence, General Hospital, on Tuesday, June 7th. There was a good attendance. Miss Frances Wilson, the President, occupied the chair. In her address she expressed the deep regret of the nurses in the death of the late King, who had so graciously honored the Canadian nurses at the International Congress in London last summer. One of the Alumnæ members had the privilege of being present.

Sorrow was also expressed at the death of Mrs. Robb, who had shed lustre on the profession and who was the author of one of the text books used in the school, and at the loss of Miss Elizabeth Charlton, Class 1896, who passed away in the hospital, April 17th.

The Secretary reported a very successful year. The membership now numbers fifty. The registry had been most satisfactory. The "At Home," held in November, had been



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most successful and had furnished the funds for the redecorating of the reception and other rooms in the Nurses' Residence. The Treasurer's report showed a balance in the treasury. The officers for the ensuing year are: Honorary President, Mrs. Tilley; President, Miss Wilson; First Vice-President, Mrs. Nichol; Second Vice-President, Miss Baker; Secretary-Treasurer, Mrs. W. Crothers. Refreshments were served and a pleasant social hour was enjoyed.

The University of Minnesota organized, over a year, the first Training School for Nurses on either side of the Atlantic, under immediate university control. It is connected with the new University Hospital, which is also unique in respect of the fact that while supported by the State it exists for teaching purposes alone. Both are under the direct charge of the faculty of the College of Medicine and Surgery. It is interesting in this relation to note that this school of medicine has been accorded very high distinction by the Carnegie Foundation for the Advancement of Teaching, and that with it the medical departments of Toronto and McGill Univerties have been favorably compared.

The signal facts connected with the organization of this Training School are that it will be regarded as a department of instruction of the university, and that it will not be exploited for the benefit of the hospital, as training schools almost universally have been in the past.

A first-grade High School diploma is necessary to admission, but preference is given to women of superior culture and attainments. All candidates undergo a medical examination to determine their physical fitness.

Hatriculants do not enter the hospital immediately, but engage, under a regular tuition fee, in a four months' preliminary course of instruction, which is conducted in the laboratories and lecture rooms of the university departments concerned. This course includes, among its subjects, anatomy, physiology, chemistry, materia medica, English, physical culture, bateriology, principles of nursing and hospital economics. The student who successfully completes the preliminary course is the admitted to the hospital for a probationary period of two months; during which she receives practical training in the general principles of nursing. The authorities reserve the right to determine her general fitness for the work at the close of this period. If she is finally accepted, she is entered for two and one-half years of further hospital service.

This undergraduate service is graded and offers unusually varied forms of training. From the men's and women's medical and surgical wards, it leads up to obstetrical nursing, to the care of special cases in the departments of children's nervous, eye and ear and nose and throat diseases, to a term in the outpatient department clinics and to an opportunity of visiting and home-nursing under experienceed directors.

After graduation from the regular three years' course, outlined above, graduates will be eligible to Head Nurseships under competitive examinations, and these will carry with them opportunities for definite post-graduate study, with especial reference to institutional work.

Small and carefully chosen classes have been entered in the school during the past year. The next matriculation will occur September 1st, 1910, and, at that date, the Training School will be under the Superintendency of Miss Louise M. Powell, recently of Columbia University.

The growth of the University Hospital, and, with it, the development of the Training School, are assured facts. Drawing, as the hospital does, from the entire State, but entering only selected patients, who carry a certificate of indigence from a local physician, it is already besieged for admissions in numbers far exceeding its present temporary capacity.

Devoted as it is to teaching purposes, in a university system of the first rank, it goes without saying that it must, of necessity, do a high order of clinical work, and it must, therefore, offer exceptional opportunities for the training of nurses. Aside from its position as a part of a major institution, a position which carries with it a certain noblesse oblige, its clientele is the medical profession of the State and its audience is a body of medical students; and there is no clientele and no audience so critical of methods and results. Such an educational system, in the present development of modern medicine, has within it a principle of inevitable growth.

The graduating exercises of the 28th Graduating Class of the Toronto General Hospital Training School for Nurses took place in the amphitheatre of the hospital on May 27th, at 3.30 p.m. A class of thirty-eight nurses—the largest which has ever left the school—received their diplomas.

J. W. Flavelle, President of the Hospital Board, occupied the chair. The diplomas and medals were presented by Sir William Meredith, Chancellor of the University of Toronto. Addresses to the graduating class were given by the senior professors on the hospital staff. While not forgetting to give much good practical advice to the graduates,

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every speaker took the opportunity to pay a high tribute to the excellent work done by Miss Snively, the Superintendent of the Training School, who is retiring from her position at the end of July.

Miss Snively, in her report, announced the names of the five nurses who went to Niagara Camp this year in charge of Miss Hatch, and who will form the nucleus of Canada's corps of army nurses.

The presentation of scholarships and prizes was an interesting feature. The scholarship for general proficiency was divided between Miss J. E. Brown and Miss M. E. Miles.

The F. D. Patterson scholarship for surgical technique and aseptic surgery was awarded to Miss Bessie M. Millman. The H. A. Bruce scholarship for operating room technique was won by Miss I. Ferguson.

The following prizes were awarded for highest standing in final examinations:

First. The Charles O'Reilly prize, to Miss L. A. Gamble.

Second. The Walter S. Lee prize, to Miss Margaret Telfer.

Third. The R. L. Patterson prize, to Miss P. Margaret Green.

Dr. J. N. E. Brown presented his prize for practical nursing to Miss A. V. Gamble.

Mrs. R. B. Hamilton presented her prize for neatness and order in room to Miss F. Brand and Miss C. McPhail.

Miss O. G. Lowes won the Mrs. W. T. White scholarship for general proficiency in the intermediate year, and the Arthur McCollum memorial scholarship for general proficiency in the junior year was presented to Miss B. B. Pollard.

The National Anthem closed the ceremony and the guests attended the reception in the grounds of the hospital, where a most enjoyable hour was spent.

On April 5th the Governor-General opened the splendid Sanitorium for the treatment of Pulmonary Tuberculosis, built by the London Health Association, and situated at Byron on a high bluff overlooking the River Thames, just outside the City of London. The Hon. Adam Beck, chairman of the London Health Association and prime mover in the whole scheme for the organized fight against the white plague in this district, introduced His Excellency and told the story of the organization and building of the institution. He said in part: "The City of London, Your Excellencies, is favored in having institutions that have done much in the past to relieve the suffering of the sick. We have two hospitals that would do credit to cities of much larger population. We have ample provisions for the aged, the incurable, homeless children, and for the imbecile. There were two ways for us to establish an institution for tuberculosis, which we have in this western district unfortunately done little to relieve. One was a municipal hospital with government aid, the other a charitable organization with municipal and government aid. We have adopted the latter plan, feeling that in giving our citizens the opportunity of giving to and helping an institution of this kind we were developing the charitable qualities of our people. We have, Your Excellencies, an institution here that will take care, not only of the incipient cases, but of acute cases, for we have an infirmary. Then we have that ministering angel the visiting nurse, who will investigate and aid cases in the city, the workshops and the public schools. We were wondering some time ago where the money was coming from, but now we have no fear. It will come from the hearts of our people. We are very fortunate, Your Excellencies, in not having to depend on large contributions. It is not the work of a dozen men and women, but the work of the citizens of London and the women of London."

The sanitorium at Byron consists of an administration building, an infirmary and four open-air cottages, affording accommodation for about forty patients. Besides these there are a laundry, a recreation building and a doctor's cottage. In many ways the institution is a model of its kind. The directors have spared neither money nor time providing a thoroughly modern plant with every comfort and convenience for the patients. The infirmary, with accommodation for eighteen patients, is connected by a covered passageway with the main building and steam heated from a central heating plant. It has wide north and south verandahs which may be converted into closed sun parlors by means of glass doors. The beds are on rubber tired wheels and can be moved in and out very easily. The cottages are private and public. They are all provided with wide and well protected verandahs, and each cottage has electric light, bath and shower. Every patient is provided with a reclining chair of the latest model, and a sleeping bag. E. A. McCulloch, B.A., M.B., formerly of Toronto, and late of Trudeau, Saranac Lake, has charge of the sanitorium and city dispensary.—Canadian Journal of Medicine and Surgery.

At the special meeting of the Graduate Nurses of the Toronto Orthopedic Hospital, called by Miss Martignoni, the Superintendent, it was decided to organize an Alumnæ Association in connection with the Training School. The following officers were elected for the year: Honorary President, Miss Martignoni; President, Mrs. A. G. McClennan; Vice-President, Miss Jean Peace; Secretary-Treasurer, Miss Lucy Loggie; Corresponding

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The graduating exercises of the Twentieth Graduating Class of Grace Hospital Training School for Nurses, Toronto, took place on June 21st, before a large number of invited guests and the medical staff. Mr. E. R. Wood, Chairman of the Board of Governors, presided. After the guests were seated the graduating class, numbering nine, dressed in white and carrying sheafs of crimson and white roses, tied with streamers of red and white ribbon, preceded by the undergraduates in uniform, walked slowly to their places on either side of the small table containing the diplomas and prizes, gaily tied with the school colors. After the opening address of the Chairman, Mr. J. E. Atkinson addressed the graduating class. His address is given in full below. Sir Henry Pellatt, who presented a piece of gold to each of the class, gave a very interesting and humorous address, and also performed the duties usually develving on Senator Cox, who was absent through indisposition.

Miss Scott, Superintendent of the Training School, requested the class to repeat in unison a leaving pledge which was impressive and dignified, and denoted careful supervision of the training and a keen interest in the future welfare of the graduates.

Mrs. J. E. Atkinson presented the diplomas to the graduates—Miss Margaret E. Patterson, Miss Maud Ethel Wiggins, Miss Edith Elizabeth Wallace, Miss L. Helena Lloyd Honey, Miss Jean L. Wilson, Miss Tily M. Rose, Miss Lizzie B. W. Durant, Miss Florence Alexandria Hunter, and Miss Mabel A. Morris.

Dr. Beatty, Superintendent of the hospital, pinned on the medals and prize pins. Dr. Palmer presented the prizes for the highest number of marks obtained in the examinations to Miss Wiggins, of the Graduating Class; Miss Bell, of the Intermediate Class, and Miss Quigley, of the Junior Class.

Dr. Beatty's prize for bandaging was presented by Miss Palmer to Miss Blewett.

Miss Scott's prize, won by Miss Dent, was presented by Miss Brent.

Mrs. Hamilton presented her prize for neatness to Miss Wallace.

The VanderSmissen medal was presented by Dr. Evans to Miss Wilson.

Miss Campbell, teacher of massage, presented a pin to each of the class.

The singing of the National Anthem closed this very interesting programme.

The guests then attended the reception held in the grounds of the Nurses' Residence, where they were received by Dr. Beatty, Miss Scott and the class. The large marquee at the end of the lawn was arranged with a long table decorated with crimson peonies and set with tempting refreshments. A most enjoyable social hour was spent by all.

MR. J. E. ATKINSON'S ADDRESS.

Mr. Chairman, Ladies and Gentlemen,—At the end of another year of work in the Nurses' Training School of our hospital, I have to congratulate the principal, Miss Scott, and the Superintendent, Dr. Beatty, upon the excellent condition of the school and the hospital. There are in this year's graduating class nine nurses, all of whom obtained over 82 per cent. This is proof of the thorough nature of the teaching done in the school as well as the capabilities of this year's graduates.

Next year's graduation will be somewhat larger as the intermediate class numbers 13. Altogether there are 41 nurses in training in the school, and 144 graduates who have gone one into the world to do their share of the important work belonging to their profession.

That the supply is not diminishing or the reputation of Grace Hospital deteriorating, is shown by the large number of applications for entrance received during the year, numbering 350.

To the lecturers who have given their time and services, the school and the hospital are greatly indebted. The special lecture course proved to be very successful and greatly added to the interest and profit of the year.

The members of the graduating class will presently be asked to make a pledge with reference to their future conduct in their profession. In it the personal responsibility which attaches to those engaged in nursing is emphasized. It is well to do so, and too much emphasis cannot be placed upon this note of responsibility.

But during the two or three minutes that I will detain you, I would like to say a word or two about the commonplace but most important subject of work. Graduation does not, of course, mean that you nurses are through with work. It does not even mean that you are through with your training. With neither work nor training will you ever be done. They make up life itself, which is, throughout all its years and changes, neither more or less than a training school. And work is the best thing in it. It is the way to happiness, the sure and only road.

Two thousand years ago a Roman Emperor, who was also one of the wisest of men, wrote, "If thou workest at that which is before thee, following right reason, seriously, calmly, vigorously, allowing nothing else to distract thee, but keeping thy divine part pure, as if thou shouldst be bound to give it back immediately: if thou holdest to this, fearing nothing, expecting nothing, but satisfied with thy present activity according to

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nature, and with heroic truth in every word and sound that thou utterest, thou shalt live happy, and there is no man can prevent it.''

Work of the right kind, therefore, being the best thing in life, and a thing, moreover, which we cannot escape if we be foolish enough to try to do so, you nurses are fortunate that you find yourselves enlisted in a profession that is one of the most responsible, honorable and useful in all work.

No other profession carries wider opportunities for service to humanity. The discharge of your duties will carry blessing to all with whom, in your professional capacity, you have to do. Not only will you be veritable angels of mercy in the sick chamber and in houses of affliction, but the members of your profession must also be by reason of their scientific training, centres of intelligence and education in all matters having to do with the health and well-being of the community—centres of enlightenment scarcely less influential than the members of the medical profession itself.

And the opportunity and responsibility which make your profession worth while will make at the same time heavy demands upon your sympathy and strength. But nothing that is worth while in this world can be done without effort—without you give yourself to it. You cannot heal the sick, whether in mind or body, except the healing virtue goes out from you. You will remember that the Great Healer Himself testified to this. Someone touched the hem of His garment and was healed, and He asked who had touched Him because He had felt the virtue go out from Him. So it has ever been and will always be the virtue must go out from you. No nurse can be of benefit to a patient except she gives freely of her sympathy and her strength in the service.

Nor is it so merely in the nursing profession. In whatever kind of work you may engage nothing can be done worth while except by spending yourself unselfishly, prodigally. And in this spending you cannot afford to practise economy. It is only a spendthrift of self who counts for anything. To seek to save yourself is the worst mistake you can make. In your profession it is beyond question true, as it is true everywhere else in life, that whosoever would save her life will lose it. Lose it not in a merely metaphorical sense, but in a very real and practical sense, because she will lose the thing which makes life work living—the contentment of soul without which work is well-nigh unbearable and happiness impossible.

BIRTHS.

At Creston, B.C., to Dr. and Mrs. G. B. Henderson, a son. Mrs. Henderson (nee Knox), is a graduate of Grace Hospital, Toronto, Class '02.

On April 1st at Toronto, to Mr. and Mrs. Wilkinson, a son. Mrs. Wilkinson (nee Pierce), is a graduate of Riverdale Hospital.

MARRIED.

At St. Stephen's Church, College Street, on Saturday, June 11th, Miss Charlotte M. Wilson (G. H.) to Mr. Frederick Pugh, Winnipeg. Mr. and Mrs. Pugh left immediately for a three months' trip abroad.

At Port Hope, on Wednesday, June 8th, by the Rev. Canon Daniel, Anna Blake, daughter of the late John S. Culverwell and Mrs. Culverwell, to George A. Brayley, all of Toronto.

At the home of the bride, 12 Empress Crescent, Miss M. Jenkins (G. H.), to Dr. Hawkins, Toronto.

At St. James' Cathedral, Toronto, on Monday, May 16th, 1910, by the Rev. J. R. Warren, Joseph O. Orr, M.D., to Anna Marie Halbhaus, daughter of the late T. J. Halbhaus, of Berlin, Ont.

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